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SECULE COUNTY OF THE COUNTY OF

JUL 01 2016 S. YOUNG

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:		ied Liability Company	<u></u>
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter t	o the following:	
	ANA WEIRA		
		Name of Person	
	THE IMPRIN	STING U.C. Firm/Company	
	210 NE 138	TH ST 33162 Address	33462 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	NORTH MIAMI	BEACH FTORIDA City/State and Zip Code	33162
	ANA THEI E-mail address: (to	HPRINTING . COL	cation)
For further information co	ncerning this matter, please ca	11:	ত
ANA Name of	TRA Person	at ()	530 530 8 Telephone Number
Enclosed is a check for the	following amount:		
SQ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = A	AMBR = Authorized Member				
<u>l'itle</u>	<u>Name</u>	Address	Type of Action		
	•		Add		
			☐ Remove		
			□ Change		
		<u>. </u>			
		 	□ Remove		
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			Change		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE IMPRINTING (Name of the Limited Liability Compan (A Florida Limited L	iv as it now appears on our records.) iability Company)	_
The Articles of Organization for this Limited Liability Company of Florida document number <u>L.15000 1467</u> Roo.	were filed on AUGUST 26, 1015 in	d assigned
This amendment is submitted to amend the following:	·	
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	56 NE 178TH ST, 33 NORTH MIAMI BEACH	765
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FLORIDA 540 NE 1787H ST. 3 NORTH MAMI BEACH FLORIDA	33165
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	: D
	. Florida	3 G
	City Zip 6	Code
New Registered Agent's Signature, if changing Registered Agent:		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending any other information, enter change(s) here: (Attach additional sheet	is, ij necessury.)
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	<i>_</i>
Effective date, if other than the date of filing:	(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing requiren document's effective date on the Department of State's records.	days after filing.) Pursuant to 605.0207 (3)
the record specifies a delayed effective date, but not an effective time, at) The 90th day after the record is filed.	12:01 a.m. on the earlier of:
Dated 27TH OF JUNE, 9046.	
A ALLIJO	
Signature of a member of authorized representative of a memb	ост

Page 3 of 3

Filing Fee: \$25.00