## Florida Department of State

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C. GOLDEN

DEC - 4 2017

P 2/5

FILEU Articles of Amendment 2017 DEC -1 AM 9: 49 to Articles of Incorporation REPAPERS CORPORATION 1 (Name of Corporation as currently filed with the Florida Dept. of State) P03000139936 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent und/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment us registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Office address of each Office (Attach additional sheet)	er and/or, Direc	tor being added:	cer/director being removed and fifte, name, and		
Please note the officers	director litle by	the first letter of the office title:			
P = President; V= Vic Executive Officer; CF0	:e President; T= O = Chief Finai	* Treasurer; S= Secretary; D= Director; TR= ncial Officer. If an officer/director holds mai	= Trustee; C = Chairman or Clerk; CEO = Chief re than one title, list the first letter of each office		
a change, wike Jones i	ed in the follows leaves the corpo	ing manner. Currently John Doe is listed as t wation, Sally Smith is named the Y and S. The	he PST and Mike Jones is listed as the V. There is se should be noted as John Doe, PT as a Change,		
wike Jones, v as Kemo	ive, and Sally Sn	nith, SV vs an Add.			
Example: X Change	PT Joh	na Doc			
X Remove	<u>V Mi</u>	Mike Jones			
X Add	SY , Sal	lly Smith			
Type of Action (Check One)	<u>Title</u> (	Name	Address		
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Add			HICKSVILLE, NY 11801		
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provisions for impl	lementing the amendment if	not contained in the	amendment itself:	
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## Alonso Garcia Fax 3054439073 >> 850-617-6381

P 5/5

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the skarcholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated  Signature  A ale A ale
By a director, president or other officer - if directors or officers have not been selected, by an incorporator if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
PAULA MADDUX
(Typed or printed name of person signing)
SECRETARY
(Title of person signing)