

PO6000045765

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000175258 3)))



H090001752583ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : EXECUTIVE CORPORATE FILING, INC.
Account Number : I20D70000059
Phone : (305) 670-3110
Fax Number : (305) 665-1078

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
09 AUG -3 AM 9:26

COR AMND/RESTATE/CORRECT OR O/D RESIGN

AV HURRICANE SHUTTERS & MORE, INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	

Amend
Name chg
@ 8/4/09

\$35

RECEIVED

2009 AUG -3 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

(((H09000175258)))

Articles of Amendment
to
Articles of Incorporation
of

AV HURRICANE SHUTTERS & MORE, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P06000045765

(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:

AV MARKETING & PRINTING, INC.

The new 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**)

14211 COMMERCE WAY

SUITE 500

MIAMI LAKES, FL 33016

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

14211 COMMERCE WAY

SUITE 500

MIAMI LAKES, FL 33016

D. If amending the registered agent and/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: _____

14211 COMMERCE WAY-STE 500

New Registered Office Address:

(Florida street address)

MIAMI LAKES

(City)

, Florida 33016

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE
09 AUG - 3 AM 9:26

(((H09000175258)))

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>MANUEL G. RODRIGUEZ</u>	<u>14211 COMMERCE WAY</u> <u>SUITE 500</u> <u>MIAMI LAKES, FL 33016</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>D</u>	<u>ALBERTO VERDECIA</u>	<u>14211 COMMERCE WAY</u> <u>SUITE 500</u> <u>MIAMI LAKES, FL 33016</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>PD</u>	<u>ALBERTO VERDECIA</u>	<u>5209 NW 74 AVENUE</u> <u>#218</u> <u>MIAMI, FL 33166</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

(((H09000175258)))

The date of each amendment(s) adoption: AUGUST 03, 2009
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders 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 AUGUST 03, 2009

Signature Manuel R.

(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)

MANUEL G. RODRIGUEZ
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)