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SECRETARY OF STATE
SECRETARSSEE, FLORID!

12/16/08

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Printi	ing & Signs Corp.
DOCUMENT NUMBER: P0700	0079546
The enclosed Articles of Amendment an	nd fee are submitted for filing.
Please return all correspondence concer	ning this matter to the following:
	Jacquie Straub
	(Name of Contact Person)
	Printing & Signs Corp.
	(Firm/ Company)
·	424-B SE 47th Terrace
	(Address)
	Cape Coral, FL 33904 (City/ State and Zip Code)
For further information concerning this	
Jacquie Straub	at (<u>239</u>) <u>541-2679</u>
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following as	mount made payable to the Florida Department of State:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee Certificate of Sta	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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2008 DEC	11	A Le	-
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	& Signs Corp.	LIARYDEST
(Name of Corporation as current	tly filed with the Florida Dept. of	ECRETARY OF STATE State ASSEE, FLORIDA
P0700	00079546	
(Document Number	er of Corporation (if known)	
rsuant to the provisions of section 607.1006, llowing amendment(s) to its Articles of Incorporation		fit Corporation adopts
If amending name, enter the new name of the	he corporation:	
ne new name must be distinguishable and ncorporated" or the abbreviation "Corp.," "I Co". A professional corporation name sociation," or the abbreviation "P.A."	Inc.," or Co.," or the designation	n "Corp," "Inc," or
Enter new principal office address, if applic rincipal office address MUST BE A STREET A		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> </u>	
If amending the registered agent and/or reg new registered agent and/or the new registe		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	(City)	, Florida (Zip Code)
ew Registered Agent's Signature, if changing		
hereby accept the appointment as registered a sition.	agent. I am familiar with and ac	cept the obligations of

Signature of New Registered Agent, if changing

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>	Address	Type of Action
Sec	Jennifer L. Murphy	1211 Golf Meadow Blvd. Valrico, FL 33594	
			Add Remove
			Add Remove
(attach d	additional sheets, if necessary). (E	Pe specific)	
provis		nge, reclassification, or cancellation of nent if not contained in the amendme	
	2	D 4 44	

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 statemer 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 shareholde action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated December 10, 2008
Signature(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)
Jacquie Straub
(Typed or printed name of person signing)
President
(Title of person signing)