P07000120143

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARS FEEF LORDA

Amend Newis 6-17-11

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORE | PORATION: | TC Mags., Inc. | |
|--|--|--|---|
| DOCUMENT NU | MBER: | P07000120143 | |
| The enclosed Artic | les of Amendment and fee a | are submitted for filing. | |
| Please return all co | rrespondence concerning th | is matter to the following: | |
| | | eph A. Porrello, Esq. | <u> </u> |
| | , | lame of Contact Person | |
| Joseph A | | eph A. Porrello, P.A. | |
| | | Firm/ Company | |
| | PO Box 450249 | | |
| Address | | | |
| | Mi | iami, Florida 33245 | |
| • | | ity/ State and Zip Code | |
| | E-mail address: (to be use | d for future annual report notification) | |
| For further informa | tion concerning this matter, | please call: | |
| Josep | oh A. Porrello, P.A. | at (305) 3 | 74-0092 |
| Name | of Contact Person | Area Code & Daytime Tel | ephone Number |
| Enclosed is a check | for the following amount n | nade payable to the Florida Depar | tment of State: |
| | ☐ \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| 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 Circl | e |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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| TC Mags., Inc. | • | |
|---|--|--|
| (Name of Corporation as currently filed with | | SECRETARY OF STATE STALLAHASSEE FLORIDA |
| P07000120143 | } | The state of the s |
| (Document Number of Corpora | .,,, | |
| Pursuant to the provisions of section 607.1006, Florida State amendment(s) to its Articles of Incorporation: | utes, this <i>Florida Profit Corpo</i> | oration adopts the following |
| A. If amending name, enter the new name of the corporati | on: | |
| | | The new |
| name must be distinguishable and contain the word "con abbreviation "Corp.," "Inc.," or Co.," or the designation "c name must contain the word "chartered," "professional assoc | Corp," "Inc," or "Co". A pro- | ofessional corporation |
| B. Enter new principal office address, if applicable: | 19191 Cloisters Lake L | ane |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | Boca Raton, Florida 33 | <u>498</u> |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 19191 Cloisters Lake La | ane |
| | Boca Raton, Florida 334 | 198 |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac | | e name of the |
| Name of New Registered Agent: Bibiana Vele | ez | |
| 19191 Clois | ters Lake Lane | |
| | rida street address) | |
| Boca Raton | , Flo | orida 33498 |
| (City) | | |
| New Registered Agent's Signature, if changing Registered | gent: | |
| hereby accept the appointment as registered agent. And fay | ifiapwith and accept the obliga | ations of the position. |
| 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 |
|--------------|--------------------------------------|---|-------------------|
| SPTD | Michael Velez | 470 SW 12th Avenue Deerfield Beach, FL 33442 | |
| SPTD | Bibiana Velez | 19191 Cloisters Lake Lane Boca Raton, Florida 33498 | ☑ Add □ Remove |
| | | | |
| | dditional sheets, if necessary). (Bo | | |
| | | | |
| provisi | | ge, reclassification, or cancellation of ent if not contained in the amendmen | |
| | | | |
| | | | |
| | | 4. 0. 11. 11. 11. 11. 11. 11. 11. 11. 11. | |

| The date of each amendment | (s) adoption: 6-8// |
|--|---|
| | (date of adoption is required) |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/we by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | re approved by the shareholders through voting groups. The following statemen d 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) |
| action was not required. | re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder |
| se j e | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court |
| арр | ointed fiduciary by that fiduciary) |
| | Bibiana Velez |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |