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R. WHITE SEP 12 2018 1018 SEP 10 AMII: 58

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: DISTRIGRAPH,	INC.	
DOCUMENT NUM	P0800070338		
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	GABRIEL FERNANDEZ		
	<del></del>	Name of Contact Person	0
	DISTRIGRAPH		
		Firm/ Company	
	791 MONTROSE ST. SE		
		Address	
	PALM BAY, FLORIDA 329	309	
		City/ State and Zip Cod	е
~-GĀ	BRIEL@PROBOPPO.COM	ARE GAR	560000000000000000000000000000000000000
-	. \	sed for future annual report	DEC PROBUPP COU. AR
	5 11211 5501 560, (10 50 12		
For further informati	ion concerning this matter, pleas	se call:	
GABRIEL FERNA	NDEZ	at (	1
Name	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$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)
<u>M</u> :	ailing Address	Street	Address
	nendment Section		lment Section
	Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building		
	illahassee, FL 32314		executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

FILED

Articles of Incorporation

of

2018 SEP 10 AM 11:58

## DISTRIGRAPH, INC. CECRETARY OF STATE (Name of Corporation as currently filed with the Morida Dept. of State) P08000070338

(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation	<u>ı:</u>
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," word "chartered," "professional association," or the abbreviate	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	PALM BAY, FLORIDA 32909
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	791 MONTROSE ST. SE PALM BAY, FLORIDA 32909
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ado	
Name of New Registered Agent GABRIEL FERNAN	
791 MONTROSE S	T. SE
(Floria	la street address)
New Registered Office Address:	32909 Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	

## 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	PEDRO PASTOR	1421 SW 107 AVENUE
Add			#190
X Remove			MIAMI, FLORIDA 33174
2) Change		<del></del>	
Add			
Remove			<del></del>
3) Change			<u></u>
Add			
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f 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)	If amending or adding additional A Attach additional sheets, if necessary	Articles, enter change(s) here:  y). (Be specific)	
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(if not applicable, indicate N/A)	provisions for implementing the ar	mendment if not contained in the amendment itself:	
	(if not applicable, indicate N/A)	)	
			-
	- <del>-</del> -		
	_ <del></del>		

AUGUST 20, 2	2018
The date of each amendment(s) adoption:late this document was signed.	, if other than t
· ·	
ffective date <u>if applicable</u> :  (no more than 90 days after to	amandment file deta)
(no more than 50 days after t	imenameni jile aalej
ote: If the date inserted in this block does not meet the applicable statutor ocument's effective date on the Department of State's records.	y filing requirements, this date will not be listed as t
doption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of v by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
by(voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without share action was not required.	cholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	der action and shareholder
Dated 08/29/2018	
Signature	ors or officers have not been
sclected, by an incorporator - if in the hands of a r	
appointed fiduciary by that fiduciary)	
GABRIEL FERNANDI	EZ
(Typed or printed name of person	on signing)
PRESIDENT	
(Title of person sign	ning)

. . . .