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Special Instructions to	Filing Officer:	





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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: MILLENNIUM	S MULTISERVICES AND PRINTING CORP
DOCUMENT NUMBER: P0900001123	31
The enclosed Articles of Amendment and fee are so	
Please return all correspondence concerning this ma	atter to the following:
MARIA E. YEPE	S
	Name of Contact Person
	Firm/ Company
6320 JOHNSON	ST
HOLLYWOOD	Address
HOLLYWOOD, F	City/ State and Zip Code
	City/ state and Zip Code
E-mail address: (to be u	ised for future annual report notification)
For further information concerning this matter, plea	se call:
MARIA E. YEPES	at (954 ) 983 0284
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee \$ Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee  Certified Copy (Additional copy is Certified Copy
enclosed)	(Additional Copy is enclosed)
to stry	Street Address
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32314	Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## MILLENNIUMS MULTISERVICES AND PRINTING CORP

(Name of Corporation as currently filed with the Flo	rida Dept. of State)
P09000011231	
(Document Number of Corporation (if	(nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MILLENNIUMS PRINTERS & MULTISER\	ICES CORP The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation  o". A professional corporation name must contain the
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 and/or registered office address:  Name of New Registered Agent	S in Florida, enter the name of the
Name of New Registerea Agent	
(Florida stree	t address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi  Signature of New Registered Agent	

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 <math>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> J	ohn Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u> s	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change	Р	FABIO ESCOBAR	6320 JOHNSON ST HOLLYWOOD, FL 33024
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

attach additional	dding additional Ar sheets, if necessary).	(Be specific)			
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provisions for in	t provides for an exc mplementing the am	endment if not	contained in the a	mendment itsel	<u>snares,</u> <u>f:</u>
(if not applie	cable, indicate N/A)				
		····	<u></u>		<del></del>

The date of each amendmen	t(s) adoption: 01/01/2012
Effective date if applicable:	01/01/2012
Effective date <u>if applicable.</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
•	01/2012
Signature _	Maria Jepes
s	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	MARIA E YEPES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)