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C. LEWIS
MAR 7, 2014
EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2014

AMANDA JARAMILLO / J.A. ACCOUNTING SERVICES INC 8906 W FLAGLER ST #219 MIAMI, FL 33174

SUBJECT: INTERNATIONAL PRINTER 2011 CORP.

Ref. Number: P11000045620

We have received your document for INTERNATIONAL PRINTER 2011 CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The amendment must be adopted in one of the following manners:

(1)If an amendment was approved by the shareholders, one of the following statements must be contained in the document.

(a)A statement that the number of votes cast for the amendment by the

shareholders was sufficient for approval, -or-

(b)If more than one voting group was entitled to vote on the amendment, a statement designating each voting group entitled to vote separately on the amendment and a statement that the number of votes cast for the amendment by the shareholders in each voting group was sufficient for approval by that voting group.

(2)If an amendment was adopted by the incorporators or board of directors without shareholder action.

(a)A statement that the amendment was adopted by either the incorporators or board of directors and that shareholder action was not required.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II

Letter Number: 314A00004187

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: INTERNAT	IONAL PRINTEI	R 2011 CORP.			
DOCUMENT NUMBI	P1100004562	0				
	f Amendment and fee are su					
Please return all corresp	ondence concerning this ma	tter to the following:				
,	Amanda Jaramillo	o				
***	Name of Contact Person					
	J.A. Accounting Services Inc					
_		Firm/ Company				
	8906 W Flalger St. # 219					
	Address					
<u>!</u>	Miami, Fl 33174					
,		City/ State and Zip Code	:			
ama	indajara@hotma	il.com				
. 		sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
		at () de & Daytime Telephone Number			
Name o	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:			
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301			

APPROVED AND FILED

Articles of Amendment to Articles of Incorporation

14 MAR -6 PH 1: 36

INTERNATIONAL PRINTER 2011 CORP.

SECRETARY OF STATE FALL AHASSEE, FLORIDA

(Name of Corporation as currently filed with the Florida Dept. of State) P11000045620 (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: 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." 8249 NW 36 ST. # 209A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) **DORAL, FL 33166** 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street 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 with and accept the obligations 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. ector 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.

X Change	Tq	John Doe			
X Remove	¥	Mike Jones			
_X Add	SV Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	MARIA M PEROZO RINCON	10916 NW 67 ST.		
X			DORAL, FL 33178		
Remove			(99%)		
2) Change	VP	MIGUEL A HERNANDEZ	10916 NW 67 ST.		
Add			DORAL, FL 33178		
X Remove					
3) Change	MG	JOSE L ALLUEVA	10916 NW 67 ST.		
Add			DORAL, FL 33178		
X Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		-	11977		
Add					
Remove					

	cles, enter change(s) here: (Be specific)
- H-44-44-44-44-44-44-44-44-44-44-44-44-44	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
., ., ., ., ., ., ., ., ., ., ., ., ., .	

APPROVEU AND FILED

The date of each amendment(s) ad	option: JANUARY 28, 2014	14 MAR -6 PM 1: 36
Effective date if applicable:		
	(no more than 90 days after amendment file date)	SEURETARY OF STATE TALLAHASSEE, FLORIDA
Adoption of Amendment(s)	(CHECKONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amend ficient for approval.	dment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		•
,	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and sha	rcholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareho	lder
Dated	- 29 - 2017	
Signature	Leax /	
	irector, president or other officer if directors or officers have no	
	d, by an incorporator if in the hands of a receiver, trustee, or othed fiduciary by that fiduciary),	ner court
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	A ALPER P II II III III II II II II II II II II
	Prosidoul-	
	(Title of person signing)	