P11000083942

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GREATER 71H D	DIGITAL PRESS INC	
DOCUMENT NUM	BER: P11000083942		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ROSANA FLEURICHAL		
		Name of Contact Person	
	GREATER 7TH DIGITAL PRESS INC		
	Firm/ Company		
	14625 NW 7TH AVENUE		
		Address	
	MIAMI, FL 33168		
		City/ State and Zip Code	
	SMITHLEFEVRE@YAHOO	D.COM	
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
SMITH LEFEVRE		at (<u>7</u> 86	2903870
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	ertment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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		Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

GREATER / IM DIGITAL PRE		urrontly	filed with the Florida Dept. of State)	<u> </u>	
P11000083942	of Corporation as c	<u>urrentiy</u>	med with the Florida Dept. of State)		
	(Document Nu	mber of (Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statute	es, this <i>Fl</i>	orida Profit Corporation adopts the fo	llowing amendn	nent(s) to
A. If amending name, enter the new n	ame of the corporat	ion:			
N/A				The ne	zw.
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,"	Corp." "Inc." or "C	To". A			
B. Enter new principal office address,	if annlicable:		SAME ADDRESS	20	
(Principal office address MUST BE A S		}		AU S	
					. * *
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			SAME MAILING ADDRESS	至	الار. الار
				. 12	
					-
D. If amending the registered agent ar			s in Florida, enter the name of the		
new registered agent and/or the new		i			
Name of New Registered Agent	ROSANA FLEUR	ICHAL	-		
	14625 NW 7TH AV	ENUE			
	Fle	rida stree	(address)		
New Registered Office Address:	MIAMI		. Florida	3168	
New Negmorea Office Address.		ı ec	(iiy)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			h and accent the abligations of the no	sition	
Therein accept the appointment as regist	erea agem. Tum ja	111111111111111	n unu uccept the obligations of the pos	11070.	
_					
Parian	or Fleurichon	<u> </u>		_ _	
	Signature of	New Reg	istered Agent, if changing		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

address of each Offic (Attach additional she Please note the officer P = President; V= Vid Executive Officer; CFO President, Treasurer, i Changes should be not a change, Mike Jones Mike Jones, V as Remo	er and/or I ets, if neces, /director tit ce Presiden () = Chief F Director wo ted in the fo leaves the c	Director being added: sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Director financial Officer. If an officer/director holds ould be PTD. ollowing manner. Currently John Doe is lister.	r; TR= Trustee; C = Chairman or Clerk; CEO = Chief more than one title, list the first letter of each office held. ed as the PST and Mike Jones is listed as the V. There is S. These should be noted as John Doe, PT as a Change,
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>	Name	Address
1) Change	P	WISLY LEFEVRE	
Add X Remove			
2) Change	P	ROSANA FLEURICHÁL	14625 NW 7TH AVENUE
X _ Add			MIAMI, FL 33168
Remove	V	SMITH LEFEVRE	14625 NW 7TH AVENUE
3) Change X	<u> </u>	SWITT AGAZVIO	MIAMI, FL 33168
Add			
Remove 4) Change	S	KETTELIE FRANCOIS	14625 NW 7TH AVENUE
$\frac{X}{Add}$			MIAMI, FL 33168
Remove			
5) Change			
Add			
Remove			
6) Chanve			

__ Add

_ Remove

and

(Attach additional sheets, if necessary). (Be specified AMENDMENT IS ABOUT REMOVE THE PRI	PROPERT WISLY LEFEVRE AND REPLACE HIM BY ROSANA -
FLEURICHAL WHO WAS ALREADY IN THE COR	RPORÁTION BUT THE CHANGE NEEDS TO BE PART OF THE
ARTICLES OF CORPORATION, ALSO, WE ADDE	D SMITH LEFEVRE AS PRESIDENT AND KETTELIE FRANCOL
AS SECRETARY.	
-	
	
F. If an amendment provides for an exchange, recla	
provisions for implementing the amendment if the (if not applicable, indicate N/A)	not contained in the amendment risen:
N/A	

•	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(n	o more than 90 days after amendment file date)
Note: If the date inserted in this block does not n document's effective date on the Department of Sta	neet the applicable statutory filing requirements, this date will not be listed as the te's records.
Adoption of Amendment(s) (CHEC	K ONE)
☐ The amendment(s) was/were adopted by the inco- action was not required.	orporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for approximation and the shareholders was a sufficient for a shareholder was a shareholder wa	reholders. The number of votes cast for the amendment(s) roval.
	archolders through voting groups. The following statement oup entitled to vote separately on the amendment(s):
"The number of votes cast for the amendm	nent(s) was{were sufficient for approval
by Wily Lefeure, hosana (voting	Flourichal, smith Lefoveë, Kettelie beaucois
Dated D8/13/ Signature Roding on Flauri	12020
Signature Robins Flaur	choil
(By a director, presiden	it or other officer – if directors or officers have not been
	rator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by	that figuriary)
Delama	Flaurichal
Tyr.	ped or printed name of person signing)
2	
Presid	rut
(Tid	e of person signing)