P13000030735

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
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CIVESION OF CORPORATIONS

C. LEWIS

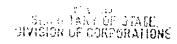
AUG 27 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Print	4 U Corp.			
DOCUMENT NUMBER: P13000030735				
The enclosed Articles of Amendment and fee are s	ubmitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
	oni Morales			
	Name of Contact Person In 4 U COSP			
· +1				
15160	SW 136 St Suite 7			
	Address			
Mian	n florida 33196			
	City/ State and Zip Code			
Print	fouru @ Gmail.com			
	used for future annual report notification)			
For further information concerning this matter, plea	ase call:			
Maryoni Morales	at (305) 914.58.53			
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	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment Articles of Incorporation of



14 AUG 25 PM 1: 51

trint 4 () Coip		14 408 23	111 4.31
(Name of Corporation as currently	filed with the Florida Dept	. of State)	-
P1300	0030735		
(Document Number	of Corporation (if known)		-
Pursuant to the provisions of section 607.1006, Floring Articles of Incorporation:	ida Statutes, this <i>Florida Pro</i>	fit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new name of the	corporation:		
			_The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or th	rp," "Inc," or "Co". A pro		
B. Enter new principal office address, if applical	ble:		_
(Principal office address <u>MUST BE A STREET Al</u>	DDRESS)		
	-	·	-
	-		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	ROY)		
(muning numress MAT BE A 1 051 01 11CE B	<u></u>)	**	_
		<u> </u>	_
			-
D. If amending the registered agent and/or registered agent and/or the new registered		da, enter the name of the	
Name of New Registered Agent			
		 	
	(Florida street address)	····	
New Registered Office Address:		. Florida	
	(City)	(Zip Code)	_
New Registered Agent's Signature, if changing R	legistered Agent:		
I hereby accept the appointment as registered agent		ept the obligations of the position.	
Signature of	New Registered Agent, if cha	nging	

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.

X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ce Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name Name	Address
1) Change	<u>. H</u>	Maryoni Morales	15160 SW 136st Unit ?
Add			Miami fl 33196
Remove			
2) Change	$\sqrt{}$	Sergio Peña	15160 SW 1365+ Unit 7
Add			Mam, \$1 33196
Remove			
3) Change	 -		_
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

-	(Be specific)
	
<u> </u>	
	<u> </u>
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and and an analysis in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, and and an angular in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the amer	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption	8 1 2014	Slave FRY OF SIATE SIVISION OF CORPORATIONS	, if other than the
date this document was signed. Effective date if applicable:	!	14 AUG 25 PM 4:51	,
	(no more than 90 days	after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The numb nt for approval.	er of votes cast for the amendment(s)	
The amendment(s) was/were approved must be separately provided for each			
"The number of votes cast for th	e amendment(s) was/were suffi	cient for approval	
by	(voting group)		
	(vonng group)		
The amendment(s) was/were adopted action was not required.	by the board of directors withou	at shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without sha	areholder action and shareholder	
Dated 8/01/2	2014		
Signature MAR	tont move	105	
(By a directo selected, by a	r, president or other officer - if	directors or officers have not been s of a receiver, trustee, or other court	
	Maryoni Morak	?{	
	(Typed or printed	name of person signing)	
	Tresident		
	(Title of p	erson signing)	