P14000021952

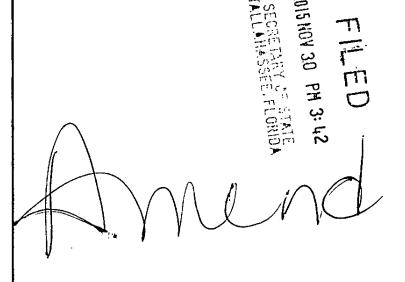
(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Union Printing, Inc	c.	
DOCUMENT NUM	BER: P14000021952		
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Barbara Stuart		
		Name of Contact Person	n
	Union Printing, Inc.		
		Firm/ Company	
	2321 Pembroke Road		
		Address	
	Hollywood Fl 33020		
		City/ State and Zip Cod	e
Barl	para@unionprinting.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas		804.0802
	CC D	at (954) 0.D - 1
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address dment Section on of Corporations a Building executive Center Circle
		Tallah	assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FI	/ .
2015 NOV 30	ED
SECRETA 30	PHZ
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Union Printing, Inc.

(<u>Name of Corporation as cu</u>	urrently filed with the Florida Dept. of State	5.42
p14000021952		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
(Document Num	mber of Corporation (if known)	TO A
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following am	endment(s)
A. If amending name, enter the new name of the corporation	ion;	
		? new
name must be distinguishable and contain the word "corp" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc. word "chartered," "professional association," or the abbrevio	" or "Co". A professional corporation name must cont	viation ain the
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>))	
	*	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		·
D. If amending the registered agent and/or registered office new registered agent and/or the new registered of fice agent		
	Marie 33.	
Name of New Registered Agent		
(Floi	orida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	A gent	
hereby accept the appointment as registered agent. I am fan		
	(Nav. Pagintared Agant if above:	
Signature of	New Registered Agent, if changing	

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>	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	<u>Addres</u> s
1) Change	VP	Charles Stuart	2321 Pembroke Road
Add			Hollywood, FL 33020
x Remove			
2)Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Remove			
6) Change			
Add			
Remove			

Stroop additional absolution	HUHAI AT DETES,	enter change(s)	<u></u> .		
Attach additional sheets, if ne	ecessary). (Be	specific)			
			• 11.4		
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		•			
f an amendment provides f	for an archanas	. realactification	a ar concellation o	ficewood charac	
provisions for implementing	ng the amendme	ent if not contain	ned in the amendm	ent itself:	
Programa ioi unbicincutu	ate N/A)				
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The date of each amendment(s) acd date this document was signed.	option:, if other than th
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east	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 shareholder
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder
November Dated	25, 2015
Signature	Lacker Sun
selecte	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Barbara Stuart
	(Typed or printed name of person signing)
	President
	(Title of person signing)