## P17 0000 85957

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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

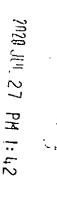


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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

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NAME OF CORP	ORATION: LAM GRAPHICS	INC	· · · · · · · · · · · · · · · · · · ·
	MBER: P17000085957		
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	LUIS ENRIQUEZ MOREIR	A	
		Name of Contact Person	1
	LAM GRAPHICS INC		
		Firm/ Company	
	7825 WEST 2 CT. UNIT 3		
		Address	
	HIALEAH, FL 33014		
		City/ State and Zip Code	:
	lamgraphics973@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, pleas	se call:	
LUIS ENRIQUEZ MOREIRA		786	715-9690
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P	Mailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

LAM GRAPHICS INC.		
(Name of Corporation as current)	y filed with the Florida Dept. of State)	
P17000085957		
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "c" inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	1 professional corporation name must contai	
B. Enter new principal office address, if applicable:	7825 WEST 2 CT. UNIT 3	3
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	HIALEAH, FL 33014	020
		= - 1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PH ::
		PH 1: 1/2
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D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		
Name of New Registered Agent		
		-
(Florida str	eet address)	-
New Registered Office Address:	Florida	
	(City) , Florida (Zip C	Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v		

Signature of New Registered Agent, if changing

## Check if applicable

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

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 = Wief 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 Charge, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ANDY ENRIQUEZ RODRIGUEZ	17530 NW 68TH AVE. APT.C2010
X Add			HIALEAH, FL 33015
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			<del></del>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			(40 MAR - 1
Remove			

Attach additional sheets, if necessa	ry). (Be spec	r change(s) her cific)			
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If an amendment provides for an provisions for implementing the	exchange, rec	lassification, o	r cancellation (	of issued shares.	ı
(if not applicable, indicate N/2	4)	not contained	m me amenor	nent usen.	
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e date of each amendment(s) adoption:, if other	er than the
e this document was signed.	
fective date if applicable:	
(no more than 90 days after amendment file date)	_
te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liscument's effective date on the Department of State's records.	sted as the
option of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sharehold action was not required.	ler
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
7-15-2020 Dated	
Signature X	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
LUIS ENRIQUEZ MOREIRA	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	_