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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPOR	ATION: SIMPL	Printing	Inc
DOCUMENT NUMB	er: <u>P220000</u>	82510	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
-	SIMF 27/8 NW. (ALUERDA	Name of Contact Person Name of Contact Person Firm Company Address Address Address City State and Zip Code Color Com Sed for future annual report	s, FC 33321
For further information	concerning this matter, pleas	se cali:	
Abby M Name o	f Contact Person	at (<u>754</u> Area Coo	, <u>Z14 - Z 3 3)</u> de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	US52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation of

Simpl Printing Inc	•
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
FZZ0000 82510	<u>. </u>
(Document Number	of Corporation (if known) [
	•
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Pioriaa Proju Corporation adopts the following athendi
A. If amending name, enter the new name of the corporation:	
$\mathcal{N}/_{\mathcal{A}}$	The no
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp. A professional corporation name must contain the wo
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	27-18 NW 30 AVE (AUDERDALE LAKES FL
	(AUDERDALE LAKES F.C.
	3332(
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	VA
	
iFlorida s	ireet address)
Van Projectoral Office Address	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	st: with and accept the obligations of the position.
	P/\$
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, 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:

 $P = President; \ V = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CE Executive Officer; \ CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each <math>V$ President, V Treasurer, V Director would be V D.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>Jo</u>	ohn Doe	
∑ Remove	<u>7.</u> <u>7</u>	like Jones	
X Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Abby NINA	2718 NW 30 AVE (AUDERDALE LAKE
Add			(AUDERDALE LAKE
Remove			FC 33321
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

E.	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
	NA
-	
_	
_	
_	
F	If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)
	N/A

The date of each amendment(late this document was signed.	s) adoption:	if oth
Effective date <u>if applicable</u> :	10/31/202Z tno more than 90 days after amendment file dates	
	nis block does not meet the applicable statutory filing requirements, this date we Department of State's records.	ill not be lis
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was were action was not required.	adopted by the incorporators, or board of directors without shareholder action a	nd sharehold
2 The amendment(s) was were by the shareholders was we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	approved by the shareholders through voting groups. The following statement 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)	, ,
Dated	10/31/2022	GCC NOW O
Signature	10/31/2022 ally l Nime	
(By sel	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	Title of person signing)	