P24000022379

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



100427022651

04/17/24--01012--009 **48.75



-17

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	·	IN AND PRINTING INC	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMI	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	YURISANDER EXPOSITO	MEDINA	
	EMANUEL DESIGN AND F	Name of Contact Perso PRINTING INC	n
	700 39TH STREET GULF U	Firm/ Company NIT 207	
	MARATHON, FLORIDA 33	Address 050	
		City/ State and Zip Coo	le
	YURISANDEREXPOSITO@	@GMAIL.COM	
	E-mail address: (to be us	sed for future annual repor	t notification)
For further informatio	n concerning this matter, pleas	se call:	
YURISANDER EXPO	OSITO MEDINA	305 at (741-1274)
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Der	partment of State:
☐ \$35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amen Divisi	Address dment Section on of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

(Name of Corpora	tion as currently filed with the Florida Dept. of State)
·	
(Dage	ment Number of Corporation (if known)
(Docu	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:
	The new
name must be distinguishable and contain the word "a "Inc.," or Co.," or the designation "Corp.," "Inc "chartered," "professional association," or the abbi	corporation," "company," or "incorporated" or the abbreviation "Corp.," ," or "Co". A professional corporation name must contain the word reviation "P.A."
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX</u>)
B. If any disease and any disease dise	
new registered agent and/or the new registered	ered office address in Florida, enter the name of the doffice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.
Sion	nature 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 = 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.

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) 1) Change X Add	<u>Title</u> S	<u>Name</u> MARIA JULIA BALAN	Address 700 39TH STREET GULF, #207 MARATHON, FLORIDA 33050
Remove 2) Change Add Remove 3) Change			
Add Remove 4) Change Add Remove		_	
5) Change Add			
Remove 6) Change Add Remove		_	

Attach additional sheets, if necessary).	cles, enter change (Be specific)			
		•		
				•
				B11 TB1/TT
	· · · · · · · · · · · · · · · · · · ·			
				<u>-</u>
f an amendment provides for an exch	ange, reclassificat	ion, or cancellat	on of issued shares	<u>.</u>
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	tained in the amo	endment itself:	
(3				
				
			,	

The date of each amendment(s) adoption:	, if other thar
date this document was signed. 04/12/2024	
Effective date if applicable:	
(no more than 90 days after amen	dment file date)
Note: If the date inserted in this block does not meet the applicable statutory fill document's effective date on the Department of State's records.	ing requirements, this date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors action was not required.	without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting group must be separately provided for each voting group entitled to vote separately or "The number of votes cast for the amendment(s) was/were sufficient for approved.	the amendment(s):
(voting group)	;"
04/12/2024	
Dated	
Signature	
(By a director, president or other officer - if directors o	r officers have not been
selected, by an incorporator - if in the hands of a receive	ver, trustee, or other court
appointed fiduciary by that fiduciary)	
YURISANDER E. MEDINA	
(Typed or printed name of person sig	zning)
PRESIDENT	- - -
(Title of person signing)	

the

the



May 7, 2024

YURISANDER EXPOSITO MEDINA 700 39TH STREET GULF UNIT 207 MARATHON, FL 33050

SUBJECT: EMANUEL DESIGN AND PRINTING INC

Ref. Number: P24000022379

We have received your document for EMANUEL DESIGN AND PRINTING INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a <u>PROFIT</u> corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Qcc 5/24

Letter Number: 524A00009895