# P94000037565

(Requestor's Name)		
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(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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#### **A1A INCORPORATION SERVICES**

2761 Vista Parkway, Suite E4 West Palm Beach, Florida 33411

> tel 800-494-3124 | fax 305-675-2811 | www.a1acorporateservices.net |

## memo

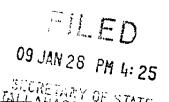
TO:	Florida Department of State, Division of Corporations	
FROM:	Christine Giordano	
DATE:	1/26/2009	
RE:	OFFSET & GRAPHIC SERVICE, INC.	

Enclosed is the Reinstatement for OFFSET & GRAPHIC SERVICE, INC. and an amendment to change the company name to CARGERCO, INC. Also enclosed is a check for \$485.00 to file these documents. Please return all correspondence to the address above.

Thank You,

Christine Giordano

#### Articles of Amendment to Articles of Incorporation



OFFSET & GRAF	<u>PHIC SERVI</u>	CE, INC.	LATE YELLOW YOF
(Name of Corporation as current	ly filed with the	he Florida Dept. of State	ENLIAMASSEE, FL
P9400	00037565		
(Document Number	er of Corporation	on (if known)	
rsuant to the provisions of section 607.1006, llowing amendment(s) to its Articles of Incorpor		es, this <i>Florida Profit C</i>	Corporation adopts the
. If amending name, enter the new name of th	<u> 1e corporation</u>	<u>:</u>	
ARGERCO, INC.			
he new name must be distinguishable and incorporated" or the abbreviation "Corp.," "I Co". A professional corporation name is sociation," or the abbreviation "P.A."	Inc.," or Co.,	" or the designation "C	orp," "Inc," or
Enter new principal office address, if applications of the company			
			BANGS - 1844 - 1855 - American 1845
			<del></del>
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
If amending the registered agent and/or reginew registered agent and/or the new register			r the name of the
Name of New Registered Agent:		<del></del>	
Name of New Registered Agent.			
New Registered Office Address:	(Floric	la street address)	
The rest of the re	(1 tortida street adaress)		
		(City)	, Florida (Zip Code)
		(~****/	(Lip Code)
ew Registered Agent's Signature, if changing thereby accept the appointment as registered a sistion.			the obligations of the
Sign	nature of New I	Registered Agent, if chan	ging

### 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)

<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			☐ Add☐ Remove
(attach addit	ional sheets, if necessary). (Be specific		100 d
provisions	dment provides for an exchange, recla- for implementing the amendment if no applicable, indicate N/A)		
*****			

The date of each amendment(s) as	doption: 1/20/2009			
Effective date if applicable:	***************************************			
Effective date if applicable:  (no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adby the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.			
	proved by the shareholders through voting groups. The following statement 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	**			
(vot	ing group)			
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder			
/ Dated 1/20/200	9			
Signature	reline Islandon			
(By a dir	rector, president or other officer - if directors or officers have not been			
	by an incorporator — if in the hands of a receiver, trustee, or other court diffiduciary by that fiduciary)			
<u>C/</u>	AROLINE J SHELTON			
	(Typed or printed name of person signing)			
PI	RESIDENT			
	(Title of person signing)			