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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Universal Checks	and Forms Inc.	<u> </u>
DOCUMENT NUMB			·
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Flease return all corresp	pondence concerning this ma	tter to the following:	
:	Roger A. Robbins		
<del>-</del>	•	Name of Contact Person	1
	Universal Checks & Forms I	nc.	·
•		Firm/ Company	
:	800 N. Highland Ave #100		
_		Address	
,	Orlando, FL 32803		
-		City/ State and Zip Cod	e
For further information	E-mail address: (to be us concerning this matter, pleas	sed for fluture annual report se call:	notification)
Brian Thornton or Rog	er Robbins	at (407	425-3285
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)
Ame Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassec, FL 32314	Amend Divisio Clifton 2661 E	Address Innent Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Universal Checks & Forms Inc.	41 A1 3 44 A1 TIL 43 TN 4 B CAAA
(Name of Cornoration :	as currently filed with the Florida Dept. of State)
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:	tanutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corp	oration:
(	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR)	ESS)
C. Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
No. 20 April 1 April 20 Clarate States and Desired	A
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I de	oren Agent: om familiar with and accept the obligations of the position.
	ure of New Registered Agent. if changing
Signati	aic of them derived on uperior if charitables

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	$\underline{\mathbf{v}}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I)Change	VP	Brian J. Thornton	
X Add	•		210 Salvador Sq
Remove			Winter Park, FL 32789
2) Change			
Add			·
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change	<del></del>		
Add			
Remove			
δ) Change			
Add		•	· · · · · · · · · · · · · · · · · · ·
Remove			

amending or adding additional Arti- ttach additional sheets, if necessary).	(Be specific)
, ···	
I an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

04-21-2016	
te date of each amendment(s) adoption:te this document was signed.	_, if other than the
04-01-2016	
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 cument's effective date on the Department of State's records.	not be listed as the
loption of Amendment(s) (CHECK ONE)	
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"	
by"  (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Copy of offun	
(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)	
Roger A. Robbins KOSEA KOBBINS	
(Typed or printed name of person signing)	
A SIDENT	
(Title of person signing)	