F12000003320

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DATE:

08/21/12

NAME:

ALPHA SHIELD, INC.

TYPE OF FILING: CORPORATE AMENDMENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

10:	Amendment Section. Division of Corporations	
SUBJ	ECT: Alpha Shield, Inc.	
		Name of Corporation
DOC	UMENT NUMBER: F1200000332	20
The en	nclosed <i>Affidavit by Foreign Corporati</i> tted for filing.	ion to Change/Add Officer(s) and/or Director(s) and fee are
Please	return all correspondence concerning t	his matter to the following:
Pete	r A. Deliso	
	Name of Contact Person	
Exec	cutive Counsel, PLC	
	Firm/Company	
1298	39 Thistlethorn Drive	
	Address	
Oal	K Hill, VA 20171 City/State and Zip Code	
pde	liso@exec-counsel.com	•
	-mail address: (to be used for future annua	report notification)
For fu	orther information concerning this matte	er, please call:
Pete	er A. Deliso	at (703) 470-8944
	Name of Contact Person	at (703) 470-8944 Area Code & Daytime Telephone Number
Enclo	sed is a check made payable to the Flor	ida Department of State for the following amount:
	\$35.00 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)
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
		Tallahassee, FL 32301

CR2E127 (10/11)







AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

The name of the foreign corporation a Alpha Shield, Inc.	The name of the foreign corporation as it appears on the records of the Florida Department of State is: Alpha Shield, Inc.		
2. This entity was authorized to transact number is F12000003320	transact business in Florida on 08/10/2012 and its Florida documen		
3. This corporation was formed under the	under the laws of Delaware		
4. The name and address of each officer	and/or director is as follows:		
Title:	Name and Address		
Director & CEO	Alex Polit		
	555 NE 15th St., Suite 200		
	Miami, FL 33132		
сто	Jon Vrabel		
	555 NE 15th St., Suite 200		
	Miami, FL 33132		
			
(Attach ac	dditional pages if necessary)		
Apra	Director & CEO		
nature of an officer or director	Title of person signing		
Polit ed or printed name of person signing	FILING FEE \$35 Make checks payable to Florida Department of State and Mail to: Division of Corporations•PO Box 6327•Tallahassee, FL 32314		
25122 (10/17)	Division of Corporations PO Box 6327 Tallahassee, FL 32314		

CR2E127 (10/11)