P080000536a5

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COVER LETTER

TO: Amendment Section Division of Corporations

F

NAME OF COR	PORATION:Joe	Reyes Security Consu	Iting Group Inc
DOCUMENT N	JMBER:	P08000053	625
The enclosed Arti	cles of Amendment and fee	are submitted for filing.	
Please return all c	orrespondence concerning t	his matter to the following:	
		Joe Reyes	
		Name of Contact Person	
		Firm/ Company	
	41	44 Laurel Ridge Circle	<u>.</u>
		Address	
,		Weston, FL 33331 City/ State and Zip Code	
	joere E-mail address: (to be us	eye@hotmail.com sed for future annual report notifical	tion)
For further inform	ation concerning this matte	r, please call:	
	Joe Reyes	at (954)	629-8994
Name	of Contact Person	Area Code & Daytir	ne Telephone Number
Enclosed is a chec	k for the following amount	made payable to the Florida E	Department of State:
□ \$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclo	S52.50 Filing Fee Certificate of Status Sed) Certified Copy (Additional Copy is enclosed)
Mailing A	<u>ddress</u>	Street Address	
Amendmer	nt Section	Amendment Section	
Division of Corporations		Division of Corporation	ns
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center	Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Joe Reyes Secu	rity Consulting Gro	up Inc	The Man
(Name of Corporation as curr	ently filed with the Flori	da Dept. of State)	
P08	3000053625		
(Document Nur	mber of Corporation (if kn	own)	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statutes, this I	Florida Profit Corporati	on adopts the following
A. If amending name, enter the new name of	of the corporation:		
JRe	eyes Group Inc		The new
name must contain the word "chartered," "pro- B. Enter new principal office address, if app (Principal office address MUST BE A STREE) C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	plicable: ET ADDRESS)	the abbreviation "P.A."	
D. If amending the registered agent and/or new registered agent and/or the new registered agent and/or the new registered Agent:		in Florida, enter the na	me of the
New Registered Office Address:	(Florida street	address)	
		, Florida	•
	(City)	(Zip Code)	'
New Registered Agent's Signature, if changi I hereby accept the appointment as registered a	ing Registered Agent:	• •	ns of the position
	Signature of New Registere	ed Agent, if changing	

	ditional sheets, if necessary)	ch Officer and/or Director beim	g added:
<u> </u>	<u>Name</u>	Address	Type of Action
			□ Damassa
			Li Remove
-			
			Remove
	ding or adding additional Article		
(attach e	additional sheets, if necessary). (Be specific)	
	mendment provides for an excha		
provis	ions for implementing the amend		
provis			
<u>provis</u>	ions for implementing the amend		
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The date of each amendment	
Effective date if applicable:	(date of adoption is required)
Effective date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of 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)
· .	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_10/2	1/2011
sele	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 ointed fiduciary by that fiduciary)
	Joseph L. Reyes
	(Typed or printed name of person signing)
	President
	(Title of person signing)