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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	#1 Security, Inc.	•
DOCUMENT NUMBER:	P1000049939	_
The enclosed Articles of Amendment a	and fee are submitted for filing.	
Please return all correspondence conce	rning this matter to the following:	
	Stacy Quinn Name of Contact Person	
	Name of Contact Ferson	
	All in One Protection Inc.	. ,
	Firm/ Company	
	1880 N.E. Dixie Highway	
्रिक्ष क्षेत्रक स्टब्स्ट्रा क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क त्रिक्ष क्षेत्रक क्ष	Jensen Beach, FL 34957	
sta	City/ State and Zip Code aceyquinn99@comcast.net	
E-mail address:	(to be used for future annual report notification)	
For further information concerning this	• • • • • • • • • • • • • • • • • • • •	
Stacy Quinn	at (772) 201-4047	· . =
Name of Contact Person Enclosed is a check for the following a	Area Code & Daytime Telephone Number - amount made payable to the Florida Department of State:	e e e e e e e e e e e e e e e e e e e
☑ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of Sta	atus Certified Copy Certificate of (Additional copy is enclosed) Certified Cop	Status
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

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(Document)	Number of Co	poration (if	known)	` ,		-	,
rsuant to the provisions of section 607.1 nendment(s) to its Articles of Incorporation	1006, Florida on:	Statutes, thi	s <i>Florida I</i>	Profit C	orporati	<i>on</i> adoj	ots the fo
If amending name, enter the new nam	e of the corpo	ration:		;			
All In	One Protec	tion, Inc.		. 1			The ner
me must be distinguishable and conta breviation "Corp.," "Inc.," or Co.," or me must contain the word "chartered," "	the designation	on "Corp,"	"Inc, " or "(Co". A	profess	tional c	d" or th orporatio
Enter new principal office address, if a	applicable:	* **	# f	. ;			•
rincipal office address <u>MUST BE A STR</u>		<u>(SS</u>):	ر چ	,]	.:		-
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If amending the registered agent and/onew registered agent and/or the new r	or registered egistered offi	office addre ce address:	ss in Florid	a, ente	r the na	me of tl	<u>1e</u>
Name of New Registered Agent:	ŧ. ,		the second second	•	:	. :	
tume of their registered right.				<u></u>	•		
•		(Florida stre	et address)				*
New Registered Office Address:			1 12 1	· · · ·	4.5 %		
New Registered Office Address:				"	, Florida	·	
New Registered Office Address:		(Citv)	.	(Zin	Code)		
New Registered Office Address: w Registered Agent's Signature, if char		(City)	1 2	(Zip	Code)		

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)

Title	<u>Name</u>	<u>Address</u>	Type of Action
<u>.</u>			☐ Add ☐ Remove
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E. II amendir (attach addi	ng or adding additional Articles, ent itional sheets, if necessary). (Be spe	er change(s) here:	
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F. <u>If an ame</u>	ndment provides for an exchange, r s for implementing the amendment	eclassification, or cancellation	of issued shares,
(if not	applicable, indicate N/A)	n ny communey in the uncoun	
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The date of each amendment(s) adoption: 7/23/10		A	<u>.</u>	į	. ,
= (date of adoption Effective date if applicable:	<u>.</u>			· •	.7
(no more than 90 days after amenda	nent file dai	(e):			
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Adoption of Amendment(s) (CHECK ONE)		Ä	-	is.	
The amendment(s) was/were adopted by the shareholders. The r by the shareholders was/were sufficient for approval.	number of v	otes ca	st for the	amendm	ent(s)
The amendment(s) was/were approved by the shareholders throumust be separately provided for each voting group entitled to vo					temen
"The number of votes cast for the amendment(s) was/were s	sufficient fo	r appro	val.		
by	,11				
(voting group)	 '		ı	•	
The amandment(s) was/ware adopted by the board of directors w	سمعاء فيتمطوان	, ahaldam	notion a	nd abanah	. ,
The amendment(s) was/were adopted by the board of directors was not required.	vitiiout Shar	enoider	action a	nd sharen	:
The amendment(s) was/were adopted by the incorporators witho	ut sharehole	der acti	on and sl	nareholde	r
action was not required.	1	,	i		
Dated 7/23/10		.,	•	•	
Daleu	•		•		•
Signature XXXII	·	,	٤		_
(By a director, president or other officer selected, by an incorporator – if in the ha					
appointed fiduciary by that fiduciary).		4		-	
		•	•		•
Stacy Qu	uinn			÷	
(Typed or printed name		igning)	•	<u> </u>	
Preside	ent	• :	Ì	٠	
(Title of person signing)				_	