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1002

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ALARM TRUST OF FLORIDA INC.				
DOCUMENT NUMBER: <u>L563</u>	13			
The enclosed Articles of Amendmen	t and fee are s	ubmitted for filing.		
Please return all correspondence cond	cerning this ma	atter to the followir	ıg:	
·		D LEVITT		
	(Name of Co	ontact Person)		
		IST OF FLORIDA IN	C.	
		ompany)		•
		OOD BLVD. (REAR) Iress)		
	(1.12.1	,		
		OOD, FL 33020 and Zip Code)		
For further information concerning the	nis matter, plea	se call:		
DAVID LEVITT (Name of Contact Person)		_ at (954)_(923-0505 2 Daytime Telepho	one Number)
Enclosed is a check for the following	g amount made	·		·
\$35 Filing Fee \$43.75 Filing Certificate of		\$43.75 Filing Fee Certified Copy (Additional copy in enclosed)	is —	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporation Building 2661 Executive Corporation	orations	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

	T OF FLORIDA INC.	TALLAHASSEE
(Name of Corporation as current	lly filed with the Florida Dept. of State)	
	56313 er of Corporation (if known)	0
Pursuant to the provisions of section 607.1006, following amendment(s) to its Articles of Incorpor		erporation adopts the
A. If amending name, enter the new name of the	ne corporation;	
The new name must be distinguishable and "incorporated" or the abbreviation "Corp.," "I "Co". A professional corporation name association," or the abbreviation "P.A."	nc.," or Co.," or the designation "Co	rp," "Inc," or
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET A		<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)	
D. If amending the registered agent and/or reg new registered agent and/or the new registe		the name of the
<u>New Registered Office Address</u> :	(Florida street address)	Elovi do
_	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a position.		the obligations of the

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>	<u>Name</u>	Address	Type of Action
DIR	RICARDO GODFREY	5161 MEADOW OAKES DRIVE COCONUT CREEK, FL 33073	
			Add Remove
	·		Add Remove
	ng or adding additional Articles, enter ditional sheets, if necessary). (Be speci		
provision	endment provides for an exchange, rec ns for implementing the amendment if	lassification, or cancellation of iss not contained in the amendment i	ued shares, tself:
(if no	t applicable, indicate N/A)		
	•		

The date of each amendment	t(s) adoption:
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_10/22	2/08
selo	y 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 pointed fiduciary by that fiduciary)
	DAVID LEVITT
	(Typed or printed name of person signing)
	PRES!DENT
	(Title of person signing)