above, or on an attachment with all other like empowered.

SIGNATURE: AMANDA BRILLANT

Electronic Signature of Signing Officer/Director Detail

39 NW 166 ST #4 MIAMI. FL 33169 US

Current Principal Place of Business:

DOCUMENT# P17000049211

FEI Number: 27-4155715

Current Mailing Address:

Name and Address of Current Registered Agent:

BRILLANT, AMANDA 39 NW 166 ST #4 MIAMI, FL 33169 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

39 NW 166 ST #4 MIAMI, FL 33169

Electronic Signature of Registered Agent

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: SPECIALIZED PROTECTION SERVICES, INC

Officer/Director Detail :

Title	Р	Title	COO
Name	BRILLANT, AMANDA	Name	BRILLANT, EMMANUEL
Address	39 NW 166 ST #4	Address	39 NW 166 ST #4
City-State-Zip:	MIAMI FL 33169	City-State-Zip:	MIAMI FL 33169

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

PRESIDENT

04/22/2019 Date

FILED Apr 22, 2019 Secretary of State 2832562454CC

Certificate of Status Desired: No

Date