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

SIGNATURE: AMANDA BRILLANT

Electronic Signature of Signing Officer/Director Detail

Current Principal Place of Business:

39 NW 166 ST #4 MIAMI, FL 33169

Current Mailing Address:

DOCUMENT# P17000049211

39 NW 166 ST #4 MIAMI. FL 33169 US

FEI Number: 27-4155715

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:

Electronic Signature of Registered Agent

2020 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

03/20/2020

FILED Mar 20, 2020 Secretary of State 7199904546CC

Certificate of Status Desired: No

Date

Date