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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 1dcn+1fux Investigative Services In a					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Bianca Abrams Name of Contact Person  Identifux Investigative Services inc. Fifm/ Company					
5725 Corporate Way Suite 208					
West Palm Beach FL 33407 City/ State and Zip Code					
bianca @ identifax. com  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
BIANCA Abrams at (561) 863-3200  Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)					
Mailing Address Amandment Section Amandment Section					

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

~ Py 2.5, (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent BIAN CA Abrams

5725 Curporate Way, Suite 208

(Florida street address) New Registered Office Address: WCH Palm BCUM, Florida 33407 New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

Please note the officer director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John	<u>Doe</u>			
X Remove	<u>V</u> <u>Mike</u>	Mike Jones			
X Add	<u>SV</u> <u>Sally</u>	<u>SV</u> <u>Sally Smith</u>			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change Add	D	James c Priddy, III	5725 Corporate Way Suite 208		
2) Change Add	<u>S</u> :	Nancy A. Priddy	Nest Palm Brach, FL 33407 P.O. Box 14884 North Palm Beach,		
X   Remove	_D	Bianca M. Abrams	FL 33408 5725 Corporate Way Suite 203 West Palm Beach FL 33407		
4) Change X_ Add Remove	<u>VP</u>	Paul J. Abrams	5725 Corporate Way Suite 208 Wist Palm Beach, FL 334117		
5) Change Add Remove	<u>S</u> _	Pamela Aicher	P.O Box 14884 North Palm Brach, Florida 33408		
6) Change Add Remove					

Attach <i>additional</i>	lding additional Articles, enter e sheets, if necessary).— (Be specij	fic)		
N/A				
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f an amendment	provides for an exchange, recla	issification, or cancell:	ation of issued shares,	
provisions for it (if not applie	plementing the amendment if rable, indicate N/A)	iot contained in the an	nendment itself:	
N/A				
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The date of each amendment(s) adoption:date this document was signed.	12/5/2017	, if other than the
Effective date <u>if applicable</u> : 12/5/2	U+7 (no more than 90 days after amendment fi	ile date)
Note: If the date inserted in this block does no document's effective date on the Department of	not meet the applicable statutory filing requi	
Adoption of Amendment(s) ( <u>CH</u>	IECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a		the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the amer	ndment(s) was/were sufficient for approval	
by	ting group)	,
(vot	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action	n and shareholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and	d shareholder
Dated 12/5/2017	1	
	ident or other officer – if directors or officer orporator – if in the hands of a receiver, trust	
<u>Bio</u>	(Typed or printed name of person signing)	
Dir	(Title of person signing)	