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M. THOMAS
AUG 3 1 2009
EXAMINER

COVER LETTER

TO:	Registration : Division of C	Section orporations		
SUBJE	LLC			
			ited Liability Company	
The en	closed Articles o	of Amendment and fee(s) are su	abmitted for filing.	
Please	return all corres	pondence concerning this matte	π to the following:	
	Eugene Eames			
			Name of Person	•
		SURVEILLA	NCE SPECIALISTS OF FLOI	RIDA
			Firm/Company	
		43 \$	South Pompano PKY 243	
			Address	FILED 2009 AUG 28 PH 12: 57 SECRETARY OF STATE TALLAHASSEE, FLORID
		Po	mpano Beach, Fl. 33069	
•			City/State and Zip Code	——
		pi@sı	urveillance-specialists.com	SAR B III
	34.34 B	E-mail address:	(to be used for future annual report notifica	tion) The B
For fur	th er information	concerning this matter, please	call:	10F
	E-			
		ugene Eames	at (954) 5	36.0775
		1		
.				
		the following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314		stration Section ion of Corporations Box 6327	STREET/COURIEI Registration Section Division of Corporati Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ABC ACTIVITY & BACKGROUND CHECKS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 10/19/2006 and assigned The Articles of Organization for this Limited Liability Company were filed on ____ L06000101850 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SURVEILLANCE SPECIALISTS OF FLORIDA, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: Same (Principal office address MUST BE A STREET ADDRESS) Same Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Same Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

. Florida

Zip Code

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member Type of Action **Address** Title <u>Name</u> ☐ Add Remove ☐ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 26 Dated Signature of a momber or authorized representative of a member Eugene Eames Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00