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## ARTICLES OF AMENIMENT TO ARTICLES OF ORGANIZATION OF

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377 2011 AUG 30 AM 9: 49 n. Unstick out or s ed Liability Company as it m. w. ppears on our records FERF TARY OF STATE.
(A Florida Limited Liability Company)

TALLAHASSEE, FLORID. TALLAHASSEE, FLORIDA The Articles of Organization for this Limited Liability Company were filed on  $\frac{\partial g}{\partial t} = \frac{\partial g}{$ Florida document number L 070 000 82714 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability con pany here: Next Level Protective Service LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abt reviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Malling 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida City

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.

If Changing Regis cred Agent, Signature of New Registered Agent

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:

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MGR = Manager MGRM = Managing Member Type of Action <u>Address</u> Title <u>Name</u> ☐ Add Remove 🛄 Add Remove ☐ Add Remave MA∏ □ Remov » ∏Add Remove D. If amending any other information, enter change(s) here: (Attac it additional sheets, if necessary.) Dated 30 August 2011 O-I Signature of a member or authorized regre ientative of a member Typed or printed name of signee Page 2 of 2 Filing Fee: \$2|5.(1)