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Office Use Only



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OCT 1 3 2010 EXAMINER

COVER LETTER

TO: Registration Section

Opivision of Corporations

SUBJECT: DETERRENT SECURITY ENFORCEMENT SERVICES, LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Name of Limited Liability Company

Please return all correspon	dence concerning this matte	r to the following:				
		Derrick L Rayner Sr				
	Name of Person					
	DETERRENT SECURITY ENFORCEMENT SERVICES, LI					
	Firm/Company					
	PO Box 14705					
	Address					
Jacksonville FL, 32238						
City/State and Zip Code draynersr@yahoo.com						
	B-mail address: (to be used for future annual report notifica	ation)			
For further information col	ncerning this matter, please	eall:				
Derrick	L Rayner Sr	at (904) 7	08-2090			
Name of Person		Area Code & Daytime Telephone Number				
Enclosed is a check for the	following amount:		,			
✓ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Piling Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

2010 OCT 12 PM 線 40

#SECRETARY OF STATE TABBAHASSEE#FLORIDA

DETERRENT SECURITY ENFORCEMENT SERVICES, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for	this Limited Liability Compa	ny were filed on	09/07/2010	and assigned
Florida document number	L10000093481			
This amendment is submitted to	amend the following:			
A. If amending name, <u>enter th</u>	e new name of the limited li	ability company her	<u>.ē</u> :	
	DETERRENT SECU			
The new name must be distinguishe "L.L.C."	ble and end with the words "Li	mited Liability Compa	my," the designation "I	LC" or the abbreviation
Enter new principal offices add	ress, if applicable:			
(Principal office address MUST	BE A STREET ADDRESS)	<u> </u>		
				
Enter new mailing address, if a	pplicable:	***************************************		
(Mailing address MAY BE A PC	<u>OST OFFICE BOX)</u>			
B. If amending the registere registered agent and/or the new			our records, <u>enter t</u>	he name of the new
Name of New Register	ed Agent:			
New Registered Office Address: Enter Florida street ad.			ter Florida street add	ress
			, Florida	
		City	,	Zip Code
New Registered Agent's Signatur	e, if changing Registered Age	ıtı		

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 Registered 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:

MGR = Ma MGRM = 1	anagor Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
 ,			Add Remove
	······································		Add
			Add Remove
D. If ameu	nding any other info	rmation, enter change(s) here: (Attach additional sheets, if necessor	ny.)
<u>.</u>			
 	October 5	2010	TALEAHASS
Dated	A Ch	Signature of a member or authorized representative of a member	TARY OF STATE
ι		Derrick L Rayner >	099 E
		Page 2 of 2	5m 6

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Filing Fee: \$25.00