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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CNAtional Security LLC dba Comp Security Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marlie Shews Jr. Name of Person
Cnational Security UC.
578 Summit Cicens Blud Address
City/State and Zip Code Charlie Lewis Jr. & Notmon's Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee. Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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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

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Subility Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1000098190</u> .	were filed on September 20,2010 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liah	illity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	in the second se
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, enter the name of the nev
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	
New Registered Agent's Signature, if changing Registered Agen	:
	ree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
IfCh	anging Registered Agent. Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>ahbb</u>	Bessie Brown	878 Summit Greens Blid	🗆 Add
		878 Summit Greens Blid Clermont, PC 34711	Remove
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ed	August !	S	, <u>2018</u>	<u>}</u> .			
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Page 3 of 3

Filing Fee: \$25.00