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COVER LETTER

TO:		istration Sec ision of Corp			
CLIDI	ССТ	ESRM SECU	JRITY LLC		
รบเม	ECT:		Name of Limit	ted Liability Company	
The e	nclosec	. Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please	return	all correspon	dence concerning this matter t	o the following:	
			Joel Medgebow		
				Name of Person	
			Medgebow Law, P.A.		
				Firm/Company	
			4171 W. Hillsboro Blv. Ste	9	
				Address	
			tomworthington@esrmcomm	City/State and Zip Code nunications.com	
			E-mail address: (t	o be used for future annual report notif	ication)
For fu	ırther iı	ıformation co	ncerning this matter, please ca	ill:	
Joel A	Medget	ow		954 478-4223 at ()	
		Name of	Person	Area Code Daytime	: Telephone Number
Enclo	sed is a	check for the	e following amount:		
≡ \$	25.00 F	iling 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:

TO:

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.

О	F 7.	
ESRM SECURITY LLC		
(Name of the Limited Liability Compa	ny ac it now annuar on our records)	
(A Florida Limited I	Liability Company)	
	were filed on 06/18/2018 and assigned	
The Articles of Organization for this Limited Liability Company	were filed on on and assigned ?	
Florida document number L18000149702	~/	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
WORTHINGTON SECURITY LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1301 W. Copans Road.	
(Principal office address MUST BE A STREET ADDRESS)	Building E. Ste 5	
	Pompano Beach, FL 33064	
Enter new mailing address, if applicable:	2436 N. Federal Hwy, #182	
(Mailing address MAY BE A POST OFFICE BOX)	Lighthouse Point, FL 33064	
B. If amending the registered agent and/or registered of	ffice address on our records, enter the name of the new	
registered agent and/or the new registered office address her		
Name of New Registered Agent:		
Naw Basistanad Office Address		
New Registered Office Address:	Enter Florida street address	
	. Florida	
	City Zip Code	

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 605, 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 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>	<u>Address</u>	Type of Action
MGR	KIM E PLEMMONS	PO BOX 1719 Pompano Beach, FL 33067	Add
			Remove
			Change
MGR	HARVEY WORTHINGTON	12115 Rockwell Way Boca Raton, FL 33428	
			☐ Remove
			Change
MGR	JAIRO POLANCO	9708 NW 1st MANOR Coral Springs, FL 33071	■ Add
			□ Remove
			□ Change
			☐ Remove
			Change
			□ Remove
			Change
			Add
			□ Remove
			☐ Change

	-
	
	
	<u> </u>
(If an e	tive date, if other than the date of filing:
the re) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of a 90th day after the record is filed.
Dated	July 24th 2019
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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Typed or printed name of signee

Filing Fee: \$25.00