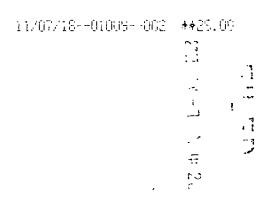
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## **COVER LETTER**

	Corporations Security Solutions, LLC		
	_	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Juan Plaza		٠.٠٠٠
		Name of Person	
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		Firm/Company	
	516 NE 166th St.		·
		Address	ь го т
	North Miami Beach, FL 33	3162	
		City/State and Zip Code	
	jplaza88@gmail.com	to be used for future annual report notif	ization)
For further information	on concerning this matter, please ca		reality.
Juan Plaza		786 288-6271	
Nan	ne of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	S30.00 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)
		OFFICALINE	

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

Florida Security Solutions, LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our record ied Liability Company)	<u>ls.</u> )
The Articles of Organization for this Limited Liability Comp.	any were filed on 11/5/2018	and assigned
Florida document number L18000222646		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited L	liability Company," the designation "LLC	c" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		; ;
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	·:
		i
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere	d office address on our record	ls, enter the name of the r
registered agent and/or the new registered office address	here:	
Name of New Registered Agent:		<del>_</del>
New Registered Office Address:		
	Enter Florida street addre	258
	City , F	loridaZin Code
	Cuỳ.	eap come

### 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
CEO	Juan Plaza	516 NE 166th St. North Miami Beach, FL 33162	Add
			Remove
MGR	Juan Plaza	516 NE 166th St. North Miami Beach, FL 33162	
			Remove
			☐ Change
MGR	Manuel Apolinar	5254 NW 114th Ave. Doral, FL 33178	
			Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change
			Remove
			Change

effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days and fining.) Fusialist to does a listed in this block does not meet the applicable statutory filing requirements, this date will not be listed ament's effective date on the Department of State's records.  The effective date on the Department of State's records.  The effective date and effective date, but not an effective time, at 12:01 a.m. on the earlier are 90th day after the record is filed.	Change Juan Plaza's title from CEO to MGR. Add Manuel Apolir		
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Filing Fee: \$25.00