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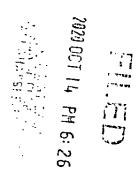
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COVER, LETTER

TO: Registration Section Division of Corporations
SUBJECT: Anti Crimes - Search And Bescue Div. LLC 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:
ADAEL J Flores Name of Person
Anti Crimes - Sepreh And Rescue DIV. LLC
5185 NW 29th Avenue, #1003
MIAMI FL 33/42-3608 City/State and Zip Code
ATTTORES AND CVINES & 9 MAN. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ADAE/ J Flores at (305) 934-9/35 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Anti Crimes - Search And Rescue Div. Lie (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/06/2020 and assigned
Florida document number <u>L20000190054</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here: O. I. G. ANTI Crimes TASK Force - ENFORCEMENT DIVISION LLC The new name must be distinguishance and contain the words "Limited Liability 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:
(Mailing 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
enter rioriaa street aaaress

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.

City

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 Membe	r

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			Remove
			□Change
			□Add
•			□ Remove
			Change
			□Add
			Remove
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			□Remove
			Change
			□Add
			☐ Change
			□Add
			□Remove
			□Change

£	Amendment III
_	Protective Service Security, Search AND Resove, Patrol/Escort Service, Executive/Dignatary Protection, Presidential Protection, Perimeter
	PATROL/ESCORT Service Executive/Dignotary
	Protection Processing Protection Protection
_	
-	
_	Protection Perimeters, Limited Surety Agent
-	Protection, Pre Trial Services Ankle Bracelet
	Monitoring, ALL LAWFUL BUSINESS
_	<u> </u>
_	
_	
_	
ffectiv	re date, if other than the date of filing: (optional)
fan effe <u>Note:</u> I	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt's effective date on the Department of State's records.
record	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
ated _	10/13/ 2020.
	Signature of amember or authorized representative of a member
	ADAE / Thones Typed or printed name of signee