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COVER LETTER

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eun trett	Address ch	langes for- Tier I Security and	Investigations LLC				
SUBJECT	:	Name of I im	ited Lability Company	·····			
The enclos	ed Articles of	Amendment and feets) are sub	unitted for filing				
Please retu	an all correspo	ondence concerning this matter	to the following:				
		Griffin Kelly					
			Name of Person				
		Tier 1 Security and Investi	gations LLC				
			Firm Company				
		7643 Gate Parkway Suite	104-1030				
			Address				
		Jacksonville, FL 32256	Name of Person 1 Security and Investigations LLC Firm Company 4 Gate Parkway Suite 104-1030 Address Sonville, FL 32250 City State and Zip Code exestigativeservicesta gmail.com E-mail address (to be used for future annual report notification) g this matter, please call: at (
			City/State and Zip Code				
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				affication)			
For further	information c	concerning this matter, please c	all:				
Griffin Ke	lly						
	Name o	d Person	Area Code Daytin	ne Telephone Number			
Enclosed is	s a check for th	he following amount					
□ 825,00	Filing 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)			
R	ailing Addres	Section	<u>Street Address:</u> Registration Sc				
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee					
	allahassee. I		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tier 1 Security and Investigations 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 Company were filed on $\frac{4/26/21}{2}$ _ and assigned Florida document number 1.21000192811 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Tier 1 Security & Investigations Enter new principal offices address, if applicable: 7643 Gate Parkway Suite 104-1030 (Principal office address MUST BE A STREET ADDRESS) Jacksonville, FL 32256 Tier 1 Security & Investigations Enter new mailing address, if applicable: 7643 Gate Parkway Suite 104-1030s (Mailing address MAY BE A POST OFFICE BOX) Jacksonville, FL 32256 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: N/A Name of New Registered Agent: 7643 Gate Parkway Suite 104-1030 New Registered Office Address: Enter Florida street address Jacksonville

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 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>	Address	Type of Action
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	Signature of a n		d representative of	'a member		· ·	_

Filing Fee: \$25.00