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TO:

Registration Section Division of Corporations

Sentry Force Security LLC SUBJECT: 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: Hector G Melendez Vazquez Name of Person Firm/Company 2674 Simpson Rd Address Kissimmee FL 34744 City/State and Zip Code grtinstructor@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Hector G Melendez Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee. ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
VP Ortiz Torrez, William		3431 Cypress point Circle	□ Add
		Saint Cloud FL 34772	≣Remove
			□Change
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