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COVER LETTER

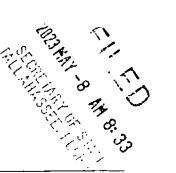
Tallahassee, FL 32314

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erib iez		ON POINT SECURITY ENFO	DRCEMENT AGENCY L	LC		
SUBJEC	UI:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·		
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		TROY HARDAWAY				
			Name of Person			
		ALWAYS ON POINT SE	CURITY ENFORCEMEN	T AGENCY LLC		
			Firm/Company	A1		
		2881 SW 142ND LN				
		·	Address			
		OCALA, FL, 34473				
		City/State and Zip Code				
		troy.hardaway.tlh@gmail.com E-mail address: (to be used for future annual report notification)				
D C		oncerning this matter, please c		cport nouncation)		
		oncerning this matter, prease c				
TROY I	HARDAWAY		407 600 at ()_	-9930		
	Name o	f Person	Area Code	Daytime Telephone Number		
Enclosed	d is a check for th	he following amount:				
□ \$25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl	Certificate of Status &		
	Mailing Address		Street Ad	dress: tion Section		
	Registration S Division of C			of Corporations		
	P.O. Box 632			tre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



ALWAYS ON POINT SECURITY ENFORCEMENT AGENCY 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	and assigned
Florida document number L23000179902		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
ALWAYS ON POINT SECURITY AGENCY LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2881 SW 142ND LN, O	CALA, FL, 34473
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	2881 SW 142ND LN, O	CALA, FL ,34473
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records,	enter the name of the new registered
Name of New Registered Agent:		
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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR/M	TROY HARDAWAY	2881 SW 142ND LN, OCALA, FL ,34473	≣ Add
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Filing Fee: \$25.00

	I Troy Hardaway am requesting to change the name of my business from
	Always On Point Security Enforcement Agency LLC to Always On Point Security Agency LLC as of 5/4/2023
	THANK YOU
•	TROY HARDAWAY 407-600-9930
m ef o <mark>te:</mark>	tive date, if other than the date of filing: 5/4/2023 (optional) Tective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
	rd 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 iled.
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Typed or printed name of signee