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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DAMARIS ACCOUNTAX SERVICE CORP

Account Number : I20210000135 Phone : (305)851-6977 Fax Number : (786)350-2077

Enter the email address for this business entity to be used for futore annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PROFESSIONAL SECURITY GROUP LLC

Certificate of Status	0
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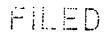
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Page: 2 of 4

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024-10-08 15:55:31 GMT



2024 OCT -8 AM 8: 55

PROFESSIONAL SECURITY GROUP LLC	
(<u>Name of the Limited Llability Com</u> (A Florida Limite	npany as it now appears on our records. AHASSEE, FLORIDA
The Articles of Organization for this Limited Liability Compa	ny were filed on 09/12/2024 and assigned
Florida document number L24000399786	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
N/A	
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent: N/A	
New Registered Office Address:	Enter Florida street address
	, Florida

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.

To. • Page. 3 of 4 2024-10-09 15:55:31 GMT 17863502077

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

From Dameris Hernandez

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	EDWIN F GONZALEZ	15476 NW 77TH CT STE 433	
		MIAMI LAKES, FL 33016	Remove
		 ,	[]Change
		□Aċd	
		□Remove	
	.	□Change	
		□Add	
		□Remove	
		□Change	
		DA₫d	
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		□Add	
		□Remove	
	 	Change	
		□Remove	
			[**]Change

2024-10-08 15:55:31 GMT

To:

Dated]

Page: 4 of 4

17863502077

From: Damaris Hernandez

OCTOBER 8TH Signature of a member or authorized representative of a member JORGE L PEREZ Typed or printed name of signee

2024