

Division of Corporations

Page 1 of 2

NO90000001198

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000225071 3)))



H190002250713ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : LIPES MATHIAS WEXLER FRIEDMAN LLP
Account Number : 120190000014
Phone : (904) 660-0020
Fax Number : (904) 660-0029

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

Email Address: cwalker@lipes.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
INVEST IN AMERICA'S VETERANS FOUNDATION, INC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$35.00 |

RECEIVED

2019 JUL 29 AM 7:40

FILED

FILED

19 JUL 29 AM 9:41

FILED

Electronic Filing Menu

Corporate Filing Menu

JUL 30 11
Help
SCHROEDER

H19000225071 3

Articles of Amendment
to
Articles of Incorporation
of

INVEST IN AMERICA'S VETERANS FOUNDATION, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N09000001198

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Patriot Services Group, Inc.

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

3948 S. Third Street

Suite 85

Jacksonville Beach FL 32250

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

3948 S. Third Street

Suite 85

Jacksonville Beach FL 32250

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

H19000225071 3

H19000225071 3

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|--------------|----------------------------|------------------------------------|
| 1) <input type="checkbox"/> Change | <u>CEO</u> | <u>Ralph Santillo</u> | <u>4120 KISMET PWY W</u> |
| <input type="checkbox"/> Add | | | <u>CAPE CORAL, FL 33993</u> |
| <input checked="" type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change | <u>D</u> | <u>Matthew Merritt</u> | <u>171 Twin Springs Road North</u> |
| <input checked="" type="checkbox"/> Add | | | <u>Kerrville, Texas 78028</u> |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change | <u>CFO</u> | <u>Michelle McCullough</u> | <u>822 A1A N</u> |
| <input type="checkbox"/> Add | | | <u>Suite 106</u> |
| <input checked="" type="checkbox"/> Remove | | | <u>Ponte Vedra Beach, FL 32082</u> |
| 4) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |

H19000225071 3

FILED
19 JUL 29 AM 9:41
TALLAHASSEE, FLORIDA

H19000225071 3

F. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Lined area for amending or adding additional Articles.

FILED
19 JUL 29 AM 9:41
RECEIVED
CLERK OF DISTRICT COURT
JUL 29 2019

H19000225071 3

H19000225071 3

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

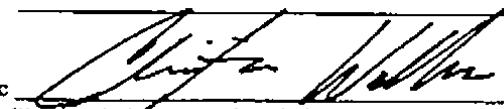
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 7/26/2019

Signature



(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Christopher Walker

(Typed or printed name of person signing)

Secretary

(Title of person signing)

FILED
19 JUL 29 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H19000225071 3