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(((H23000401395 3)))



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Corporate Filing Menu

Help

### H23000401395 3 COVER LETTER

TO: Amendment Section Division of Corporations

# PATRIOT SERVICES GROUP, INC.

N0900001198

DOCUMENT NUMBER:

NAME OF CORPORATION:

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JENI SMITH

(Name of Contact Person)

LIPPES MATHIAS LLP

(Firm/ Company)

# 10151 DEERWOOD PARK BLVD, BLDG 300, STE 300

(Address)

JACKSONVILLE, FL 32256

(City/ State and Zip Code)

## JSMITH@LIPPES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JENI SMITH

904

660-0020

(Name of Contact Person)

(Davtime Telephone Number) (Area Code)

Enclosed is a check for the following amount made payable to the Florida Department of State:

🖀 \$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	🗆 \$52.50 Filing Fee
	Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

H23000401395 3 Articles of Amendment to Articles of Incorporation oſ

(Document Number of Corporation (if known)

# PATRIOT SERVICES GROUP, INC

N0900001198

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

From

Pursuant to the provisions of section 617.1006, Florida St amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:
name must be distinguishable and contain the word "corp "Company" or "Co," may not be used in the name.	The new poration'' or ''incorporated'' or the abbreviation ''Corp.'' or ''Inc.''
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE</u>	(222
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAYBE A POST OFFICE BOX</u> )	4016 S THIRD STREET, #1007
(Multing duaress <u>MAT DE ATOST OTTTEE BOR</u> )	JACKSONVILLE BEACH, FL 32250
D. <u>If amending the registered agent and/or registered</u> <u>new registered agent and/or the new registered offi</u> <u>Name of New Registered Agent</u> :	
	(Florida street address)

New Registered Office Address:

<u>New Registered Agent's Signature, if changing Registered Agent:</u> 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



.1

, Florida (Zip Code)

(City)



# 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John E</u> <u>V</u> <u>Mike J</u> <u>SV</u> <u>Sally S</u>	ones	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	<u>D</u>	ELIZABETH PEAK	1428 FOREST LANE SAINT JOHNS, FL 32259
2) Remove 2) Change Add	<u>D</u>	CAMERON HOOPER	100 N LAURA ST. STE 802 JACKSONVILLE, FL 32202
2 ) Remove 3 ) Change Add Remove	<u>D</u>	CHRIS DENNIS	233 ORCHARD STREET WESTFIELD, NJ 07090
4) Change Add			
Remove 5) Change Add			
Remove			
ර) Change Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (attach additional sheets, if necessary). (Be specific)

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

Effective date <u>if applicable</u>:

(no more than 90 days after amendment file date)

<u>Note:</u> 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.



I 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 <u>11/21/2023</u> Signature <u>Beth Smetti</u>

 (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)

BETH SMITH

(Typed or printed name of person signing)

CO EXECUTIVE DIRECTOR

(Title of person signing)