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PICK-UP WAIT MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

America's Sheriff, Inc. NAME OF CORPORATION:
N20000008919
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Larry Klayman
(Name of Contact Person)
(Firm/ Company)
7050 W. Palmetto Part Rd
(Address)
Boca Raton, FL, 33433
(City/ State and Zip Code)
leklayman@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dina James 310 7709712 at
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee & 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

Articles of Amendment to Articles of Incorporation of

America's Sheriff, Inc.		
(Name of Corporation as currently filed with the Florida D	ept. of State)	
N20000008919		
(Document Number	er of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For</i>	Profit Corporation adopts the follow
A. If amending name, enter the new name of the corporati	on:	
N/A		The n
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		2020
		SEP
C. Enter new mailing address, if applicable:	N/A	4
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		12
D. If amending the registered agent and/or registered offic		enter the name of the
new registered agent and/or the new registered office a	uuress:	
Name of New Registered Agent:		. <u></u>
	<i>tFle</i>	rıda street address)
New Registered Office Address:		
		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: niliar with and accept i	he obligations of the position.
	gnature of New Registe	red Agent, if changing



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: X Change X Remove X Add	PT John I V Mike J SV Sally S	<u>lones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	Demetrick Pennie	7050 W. Palmetto Park Rd Boca Raton, FL, 33433
Remove			
2) Change Add	_Q	Larry Klaymer	Score Goldless
Remove Change Add Remove		Joseph Arpais	some oddrss
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or add (attach additional she		ticles, enter change(s) here: (Be specific)	
N/A			
		····	
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The date of each amendment late this document was signed	t(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	8/31/2020	
<u></u>	(no more than 90 days after amendment file date)	
<u>dote:</u> If the date inserted in the locument's effective date on the	his block does not meet the applicable statutory filing requirements, this date will not be be because the beginning of State's records.	ot be listed as the
adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) opproval.	LK.

Dated Signatu	(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)
	Larry Klayman (Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.