## N94000000688

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





100332839781

08/14/19--01016--019 \*\*35.00

S TALLENT AUG 21 2019



grand

## **COVER LETTER**

NAME OF CORPORATION: Association of Special Investigation Units
NAME OF CORPORATION: ASSOCIATION 6+ Special Investigation Units
DOCUMENT NUMBER: <u>N94000600688</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAVID A. BRONSTEIN, ESQ (Name of Contact Person)
Ronstein & Contact Person)  (Name of Contact Person)  (ARMONA P. A.  (Firm/Company)
8000 Peters Road, Svite A-200
Ft. Landerdale, Fl 33324  (City/State and Zip Code)
dbronstein © bronstein = Carmona. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
See above at 954 358-0444
(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 \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& \Bigcup \\$Certificate of Status Certified Copy (Additional copy is enclosed)  \$\Bigcup \\$35 Filing Fee \& \Bigcup \\$52.50 Filing Fee \& \Bigcup \\$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 Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

A. If amending name, enter the new name of the corporation:  The new same must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."	A whiolog	of Amandment	
Articles of Incorporation  South Florida. Chafter of the atternational Association  of Special Investigation Units Time.  (Name of Corporation as currently filed with the Florida Dept. of State)  Notice (Name of Corporation as currently filed with the Florida Dept. of State)  (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 mendment(s) to its Articles of Incorporation:  Note that the corporation of the corporation:  Note that the new name of the corporation or "incorporated" or the abbreviation "Corp." or "Inc."  Company" or "Co." may not be used in the name.  8. Enter new principal office address, if applicable:  Principal office address MAY BE A STREET ADDRESS)  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:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent:  hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Articles		
(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 mendment(s) to its Articles of Incorporation:  A. If amending name, eater the new name of the corporation:  The new 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.  3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent:  New Registered Office Address:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Agent:  New Registered Agent as registered agent. I am familiar with and accept the obligations of the position.	S 11 Classification P 11		Association
(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 mendment(s) to its Articles of Incorporation:  A. If amending name, eater the new name of the corporation:    Main	of Special Investigation V	International	<u>/1</u> 2500/&(107)
(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 mendment(s) to its Articles of Incorporation:  A. If amending name, eater the new name of the corporation:  The new 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.  3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent:  New Registered Office Address:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Agent:  New Registered Agent as registered agent. I am familiar with and accept the obligations of the position.	(Name of Corporation as current	ly filed with the Florida Dept. of St	<u>ate</u> )
(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 mendment(s) to its Articles of Incorporation:  N. If amending name, enter the new name of the corporation:  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.  8. Enter new principal office address, if applicable:  Principal office address MUST BE ASTREET ADDRESS)  C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  (Florida sweet address)  New Registered Agent:  (Florida popointment as registered agent. I am familiar with and accept the obligations of the position.	N9400000688		
The new 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.  3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  (City)  New Registered Agent:  (City)  (City)  (City)  (City)  New Registered Agent:  (City)  New Registered Agent:  (City)	(Document Number	r of Corporation (if known)	
The new same 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.  3. Enter new principal office address, if applicable: (Principal office address, if applicable: (Mailing address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (City)  (City)  (City)  (City)  (City)  (City)  (City)  (City)  (Address)  New Registered Agent's Signature, if changing Registered Agent: the obligations of the position.	Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this <i>Florida Not For Profit Corpor</i>	ation adopts the following
ame 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.  3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )  C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  (City)  (C	A. If amending name, enter the new name of the corporation	on:	
ame 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.  3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )  C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (City)  (C	N/A		The way
S. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (Florida street address)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	name must be distinguishable and contain the word "corporati	on" or "incorporated" or the abbrev	
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:  New Registered Office Address:  (City)  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	"Company" or "Co." may not be used in the name.	,	•
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:  New Registered Office Address:  (City)  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		$\sqrt{c}$	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (City)		<i>── ^//</i> <del>}</del>	
(Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Trincipui office unuress most be ASTREET ADDRESS	/ '	5 29
(Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			
(Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: (Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	C Enter new mailing address, if annlicable:	. / ^	
Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  New Registered Office Address:  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		$\mathcal{N}\mathcal{T}$	
Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  New Registered Office Address:  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	<del>-</del>	. /	學學 主
Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  New Registered Office Address:  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			-11-11 -
Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			6
Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  New Registered Office Address:  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	D. If amounting the against and against and for receipt and office	o address in Florida, enter the nam	e of the
Name of New Registered Agent:  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			e or the
New Registered Office Address:  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		/	
New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Name of New Registered Agent:	<del></del>	
New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		$\mathcal{N}/\mathcal{N}$	
(City), Florida, Florida, (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	<del></del>	(Florida street addres	(s)
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Office Address:		
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			Florida
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		(City)	(Zip Code)
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			•
$\mathcal{N}/\mathcal{A}$			-Calid
Signature of New Registered Agent, if changing	l hereby accept the appointment as registered agent. I am Jan	illar with and accept the obligations	of the position.
Signature of New Registered Agent, if changing		NA	
, ·	Sig	znature of New Registered Agent, if c	hanging

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 <math>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	Jones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	P (chang	Edward Lopez e from T to P)	8000 Peters Road, Ste A-201 Ft Londerdale Fl 33324
Remove	-		
2) Change Add	<u> </u>	Yolanda Velazquez	same as above
Remove 3) Change Add	<u>S</u> _	Barkara Massarella	same as above
Remove 4) Change Add	<u>P</u>	Nancy Jensen	
7 Remove  5) Change Add	<u>S</u> _	Monique Marsden	
Remove  6) Change	$\overline{\mathcal{D}}$	Frederick Burkhardt	
Add Remove			

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:					
(attach additional sheets, if necessary). (Be specific)					
Remove as D: Wendy Sassman					
Add as VP = Shannen Klotz					
·					

The date of each amendment(s) adoption: $\frac{\sqrt{\sqrt{9} + 8}, 2019}{\sqrt{9}}$ .	if other than the
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 a document's effective date on the Department of State's records.	isted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes east 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 6th August 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)	
Edward Lopez (Typed or printed name of person signing)	
President	·
(Title of person signing)	