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CR2E031(9/92)

ARTICLES OF AMENDMENT₀₃ FILED TO SECRETARY OF STATE ARTICLES OF INCORPORATION FILED FILED ARTICLES OF AMENDMENT₀₃ SECRETARY OF STATE ARTICLES OF INCORPORATION

OF

LIONS SECURITY FORCE AGENCY, INC.

(PRESENT NAME)

PURSUANT TO THE PROVISIONS OF SECTION 607,1006, FLORIDA STATUTES, THIS CORPORATION ADOPTSS FTHE FOLLOWING ARTICLES OF AMENDMENT TO ITS ARTICLE OF INCORPORATION:

FIRST:

AMENDMENT(S) ADOPTED: (INDICATE ARICLE NUMBER(S) BEING

AMENDED ADDED OR DELETED)

ARTICLE VI

WAS:

PRESIDENT

SENEN FERNANDEZ

NOW:

PRESIDENT

JOSE L. ARDILA

VICE-PRESIDENT

AMPARO CAROLYN NAVARRO

SECRETARY

JOSE L. ARDILA

TRESURER

AMPARO CAROLYN NAVARRO

SECOND:

IF AN AMENDMENT PROVIDES FOR AN EXCHANGE, RECLASSIFICAATION OR CANCELLATION OF ISSUED SHARES, PROVISIONS FORIMPLEMENTING THE AMENDMENT IF NOT CONTAINED IN THE AMENDMENT ITSELF, ARE AS FOLLOWS:

THIRD:

THE DATE OF EACH AMENDMENT'S ADOPTION: 08/05/03

FOURTH: ADOPTION FO AMENDMENT(S) (CHECK ONE)

* THE AMENDMENT(S) WAS/WERE APPROVED BY THE SHAREHOLDERS. THE NUMBER

OF VOTES CAST FOR THE AMENDMENT (S) WAS/WERE SUFFICIENT FOR APPROVAL.

THE AMENDMENT(S) WAS/WERE APPROVED BY THE SHAREHOLDERS THROUGH **VOTING GROUPS.**

| THE FOLLOWING STATEMENT MUST BE SEPARATELY PROVIDED FOR EACH VOTING GROUP ENTILTLED TO VOTE SEPRATELY ON THE AMENDMENT(S) |
|---|
| "THE NUMBER OF VOTES CAST FOR THE AMENDMENT(S) WAS/WERE SUFFICIENT FOR APPROVAL BY (VOTING GROUP) |
| * THE AMENFMENT(S) WAS/WERE ADOPTED BY THE BOARD OF DIRECTORS WITHOUT SHAREHOLDER ACTION AND SHAREHOLDER ACTION WAS NOT REQUIRED. |
| * THE AMENDMENT(S) WAS/WERE ADOPTED BY THE INCORPORATORS WITHOUT SHAREHOLDER ACTION AND SHAREHOLDER ACTION WAS NOT REQUIRED. |
| SIGNED THIS 05 DAY OF AUGUST 2005 |
| SIGNATURE |
| (By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted |
| by the shareholder(s) |
| OR |
| (By a director if adopted by the directors) |

OR

(By an incorporator if adopted by the incorporators

| SENEN FERNANDEZ | e., i., | :, <u>;</u> |
|-----------------------|---------|-------------|
| Typed or printed name | | |
| | | |