

B1000034523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

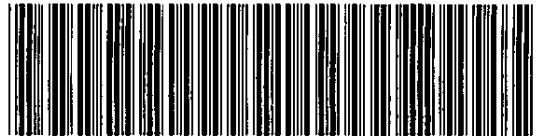
(Document Number)

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2009 AUG 21 PM 2:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amey  
[Signature]



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 30, 2009

ELAINE MARCIANO  
2800 N.W. 56 AVENUE  
D402  
LAUDERDILL, FL 33313

SUBJECT: INCENTIVE GROUP PROTECTION SERVICES, INC.  
Ref. Number: P01000034523

We have received your document for INCENTIVE GROUP PROTECTION SERVICES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must have original signatures.

The First page of the Article of Amendment was not enclosed. Please complete and return.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 909A00026209

RECEIVED  
AUG 21 AM 8:00  
SECRETARY OF  
TALLAHASSEE

**COVER LETTER**


TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: INCENTIVE GROUP Protection Ser, INC

DOCUMENT NUMBER: P 010000 34523

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

Please return all correspondence concerning this matter to the following:

<u>Elaine Marciano</u> Name of Contact Person	 <u>2hel</u> <u>ang</u> U.S. Customs and Border Protection <a href="http://www.cbp.gov">www.cbp.gov</a>
<u>s/a</u> Firm/ Company	
<u>2800 n.w. 66ave D.</u> Address	
<u>Lauderhill Florida 3</u> City/ State and Zip Code	
<u>Marciondaud@aol.com</u> E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

s/a at ( 954 ) 254-1807  
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:

- |                                                     |                                                                        |                                                                                                  |                                                                                                                         |
|-----------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(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

Articles of Amendment  
to  
Articles of Incorporation  
of

INCENTIVE GROUP PROTECTION SERVICES, INC.  
(Name of Corporation as currently filed with the Florida Dept. of State)

PO1000034523

(Document Number of Corporation (if known))

FILED  
2009 AUG 21 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

\_\_\_\_\_ The new  
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the  
abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation  
name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. 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)

\_\_\_\_\_, Florida

(City)

(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

**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)*

<b>Title</b>	<b>Name</b>	<b>Address</b>	<b>Type of Action</b>
<u>Sec</u>	<u>Lensworth B. Barnes</u>	<u>706 NORTH E ST</u> <u>Lakewood, Florida</u> <u>33460</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
*(if not applicable, indicate N/A)*

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The date of each amendment(s) adoption: 7/20/09  
(date of adoption is required)  
Effective date if applicable: a.s.a.p.  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders 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 entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_"  
(voting group)

☒ The amendment(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.

Dated 7/20/09

Signature Elaine Marciano  
(By a director, president or other officer – if selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)

Elaine Marciano  
(Typed or printed name of person)

President  
(Title of person signing)



U.S. Customs and  
Border Protection  
[www.cbp.gov](http://www.cbp.gov)