Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H200003664573)))



H200003864573ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations Fax Number : (850)617-6380

From:

Account Name: BOSCH ACCOUNTING & TAX SERVICES CORPORATION

Account Number: 119990000045 Phone: (954)730-0640 Fax Number: (954)730-0292 R. WHITE COT 2000

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: BOSCHACCOUNTING@HOTMAIL.COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN ADVANCED SAFETY CONSULTING GROUP, INC.

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO: Amendment Section

(((H20000366457 3)))

COVER LETTER

Division of Corpo	orations		
NAME OF CORPOR	ADVANDCED SA	FETY CONSULTING GR	OUP, INC.
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	omitted for filing.	•
Please return all corres	spondence concerning this ma	tter to the following:	
	JAIRO BOSCH		
		Name of Contact Person	1
	BOSCH ACCOUNTING AN	D TAX SERVICES CORP	PORATION
		Firm/ Company	
	5440 NORTH STATE ROAL		
,		Address	
	FORT LAUDERDALE, FL	3319	
		City/ State and Zip Code	2
	BOSCHACCOUNTING@H	OTMAIL.COM	
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
JAIRO BOSCH		at (954	730-0640
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	iling Address		Address
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

Tallahassee, FL 32314

(((H200003664573)))

Articles of Amendment

to Articles of Incorporation $\frac{r_1}{2}$ of

n: " 1:43

(<u>tyane o</u>	f Corporation as current	tly filed with the Florida Dept. of State)
P01000048556		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ime of the corporation:	
N/A		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "
The True of the Land of the American	if anniicable:	N/A
B. Enter new principal office address, (Principal office address MUST BE A S	TREET ADDRESS	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A
D. If amending the registered agent an new registered agent and/or the new	d/or registered office ad- w registered office addre	dress in Florida, enter the name of the
	N/A	
Name of New Registered Agent		
Name of New Registered Agent		
Name of New Registered Agent	(Florida s	treet address)
	•	·
Name of New Registered Agent New Registered Office Address:	•	rreet address) , Florida (City) (Zip Code)
	•	, Florida
New Registered Office Address: New Registered Agent's Signature, if c	N/A changing Registered Ager	, Florida(City) (Zip Code)
New Registered Office Address: New Registered Agent's Signature, if c	N/A changing Registered Ager	, Florida (City) (Zip Code)

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Check if applicable

Example:

(((H20000366457 3)))

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:

9547300292

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.

X Change	PT	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change	V/S/D	William G Thompson, IV	2901 NW 126th Avenue, Apt 209	
Add			Sunrise, FL 33323	
X Remove				
2) Change	V/S/D	Margarita Thompson	2901 NW 126th Avenue, Apt 209	
x Add			Sunrise, FL 33323	
Remove Change				
Add				
Remove		,		
. 4) Change				
Add				
Remove			2000	
5) Change				
Add				
Remove			·	
6) Change	-			
Add				
Remove				

 $(((H20000366457\ 3)))$

If amending or adding additional Arti (Attach additional sheets. if necessary).	(Be specific)
R/A	
	
	•
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
	·

(((H200003664573)))	
The date of each amendment(s) a date this document was signed.	doption:, if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
Ostaber 20	2020
October 20 Dated	, 2020
///	organita Thompson
Signature W.	lirector, president or other officer – if directors or officers have not been
	d, by an incorporator – if in the hands of a receiver, trustee, or other court
	ted fiduciary by that fiduciary)
	Margarita Thompson
	(Typed or printed name of person signing)
	President
	(Title of person signing)