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COVER LETTER

TO: Amendment S Division of C		•	•		
NAME OF CORI	PORATION: Unle	Vcover Surveill	ance, Inc		
DOCUMENT NU	MBER: 60300	0047358			
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.			
Please return all co	orrespondence concerning th	is matter to the following:			
	Scott S	Schneiler Name of Contact Person			
	Undercou	er Surveillance, Firm/Company	Inc		
6574 N. St. R.L. 7 #242 Address					
	Coconut C	Yeelc, FL 33c	073		
	Scotts e Unle E-mail address: (to be use	d for future annual report notification)	<u>. سک</u>		
For further informa	ation concerning this matter,	please call:	/		
Scott	Schneider of Contact Person	at (<u>95 4</u>) <u>85 7 -</u> Area Code & Daytime Te	- 1200 954-553-276 Dephone Number		
Enclosed is a check	s for the following amount m	nade payable to the Florida Depar	rtment of State:		
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	* \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Ac	•	Street Address			
Amendmen		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

OIVISION OF CORPORA	
09 AUG 24 PM 2:	TIONS
· ** PM 2.	.

4	^ -			Ug Alina	HATI
undercover.	Survei	11 ance	.Inc	. 09 AUG 24	PM 2. 20
(Name of Corporation as currently			of State)		2. 23
P 030000 4735	·S				
(Document Number		(if known)			
Pursuant to the provisions of section 607.1006, F amendment(s) to its Articles of Incorporation:	lorida Statutes,	this <i>Florida I</i>	Profit Corporation	on adopts the	following
A. If amending name, enter the new name of the	e corporation:				
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the desiname must contain the word "chartered," "profess	signation "Corp ional associatio	o," "Inc," or "on," or the abb	Co". A profess reviation "P.A."	ional corpora ,	the tion
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	<u>ble:</u> <u>DDRESS</u>) ∠	Margate,	State Rd FL 33	. 7 50 063	He#117
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE A	<i>BOX</i>)				
D. If amending the registered agent and/or registered agent and/or the new registered			la, enter the nai	me of the	
Name of New Registered Agent:					
New Registered Office Address:	(Florida	street address)	. <u></u>		
			, Florida		
	(City)		(Zip Code)		
New Registered Agent's Signature, if changing For I hereby accept the appointment as registered agent Signature.		with and acce		s of the positi	on.

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)

<u>Title</u>	Name ()	Address	Type of Action
<u>VP_</u>	Diane Prestano	2170 NE 51 ST C+ Apt. C27 Ft. Laudendale, Fl.	_ 2 Add _ □ Remove _333 <i>08</i>
•		*	_
<u></u> _			_
	•	' •	
provisio	nendment provides for an exchange, recons for implementing the amendment if ot applicable, indicate N/A)	classification, or cancellation of is not contained in the amendment	sued shares, itself:
		' 's	
 .			

The date of each amendment	(s) adoption:	(date of adoption is required)
. •		(date of adoption is required)
Effective date if applicable:		AUGUSI 20. LOUI
	(no more than 90	days-after amendment file date)
Adoption of Amendment(s)	(CHE	CK ONE)
The amendment(s) was/we by the shareholders was/we		hareholders. The number of votes cast for the amendment(s) proval.
		shareholders through voting groups. The following statemer roup entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendr	ment(s) was/were sufficient for approval
by	(voting group)	,,
	(voting group)	
action was not required. The amendment(s) was/we action was not required.	re adopted by the in	. ncorporators without shareholder action and shareholder
Dated	8/20/09	
Signature		X OSE
(By sele		nt or other officer – if directors or officers have not been orator – if in the hands of a receiver, trustee, or other court that fiduciary)
	Sca	of the Schneiler d or printed name of person signing)
	(Type	ed or printed name of person signing)
	Pres:	dent
	(Title of p	person signing)