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| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Ci | ty/State/Zip/Phon | e#) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | ocument Number) | , |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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2007 FEB 19 AMIN: 1.9

Ps 21/07 Anend

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: (1/26A) | Protective Con | <u>sultants</u> Inc |
|--|---|---|
| DOCUMENT NUMBER: P 04 00 | 00126728 | |
| The enclosed Articles of Amendment and fee are | e submitted for filing. | |
| Please return all correspondence concerning this | matter to the following: | |
| MR. Michael (Name of | el Celestin (Confact Person) | |
| Global Protective | Consultants, En | <u>c</u> |
| 888 NE 126th str | eet #203 Address) | |
| North - Hiami, Fl (City/ Sta | 3316 [ate and Zip Code) | |
| For further information concerning this matter, p | please call: | |
| HC Hichel Colestin (Name of Contact Person) | at (305) 305-5 (Area Code & Daytime To | elephone Number) |
| Enclosed is a check for the following amount: | | |
| \$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 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 Circ Tallahassee, FL 32301 | le |

SLCRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Amendment to Articles of Incorporation

2007 FEB 19 AM 10: 49

| of |
|---|
| Clobal Protective Consultants Inc (Name of corporation as currently filed with the Florida Dept. of State) |
| P04000126728 |
| (Document number of corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
| NEW CORPORATE NAME (if changing): |
| Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) HR. Gabriel Edouard Monfiston is being Added as an officer of the company with the title of vice-President/COO his mailing Address is 16024 Sw 299 terrace. Howestead Fl 33030 |
| |
| |
| (Attach additional pages if necessary) |
| If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/ |

| The date of each amendment(s) adoption: 07/13/07 |
|---|
| Effective date if applicable: 62/13/07 (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (CHECK ONE) |
| The amendment(s) was/were approved 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. |
| Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| Michel Celestin (Typed or printed name of person signing) |
| President/CFO (Title of person signing) |

FILING FEE: \$35