## P05000039586

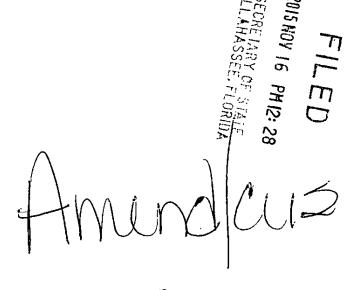
(R	lequestor's Name)				
(Address)					
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(C	City/State/Zip/Phone	<del>(#)</del>			
PICK-UP	☐ WAIT	MAIL			
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: PROTECTSA INC		
DOCUMENT NUMI	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JUAN C GUIARDINU		
		Name of Contact Person	1
	PROTECTSA INC		
		Firm/ Company	
	4821 WEST 4TH AVE		
		Address	
	HIALEAH / FL 33012		
		City/ State and Zip Cod	e
guiar	dinu@gmail.com		
<del>-</del>		sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	.786	<b>.</b> 4262979
Name of Contact Person		at ( Area Co	de & Daytime Telephone Number
	r the following amount made		•
□ \$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)
Amo Div P.O	conding Address conding the section of Corporations and Samuel Box 6327 canassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Cassec, FL 32301

## Articles of Amendment to Articles of Incorporation of

PROTECTSA INC				
(Name o	of Corporation as currentl	y filed with the Florida De	ept. of State)	
P05000039586				
	(Document Number o	f Corporation (if known)		<del></del>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	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 com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "	Co". A professional corpe	rporated" or the ab-	breviation
B. Enter new principal office address, (Principal office address MUST BE A S		N/A		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )		N/A	SECRETE PER	第 万 二
D. If amending the registered agent an			SSEE FLOWING	ED PH 2: 28
new registered agent and/or the new		<u>:</u>	>	<b></b>
Name of New Registered Agent	N/A			
	(Florida str	eet address)		
New Registered Office Address:	N/A		. Florida	
The wind state of the state of		(City)	(Zip Ce	ode)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist			ions of the position.	·
<del></del>	Signature of New I	Registered Agent, if changing	g	

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:

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.

Example: X_Change	<u>PT</u>	<u>John Do</u>	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith_	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	V		MARIO GUIARDINU DE AZCARATE	2993 W 80TH STREET APT 16
X Add				HIAELAH, FL 33018
Remove				
2) Change		_		
Add				
Remove				
3 ) Change	-	_		
Add				
Remove				
4) Change	<del></del>	<del></del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	****			
Add				
Remove				<del></del>

	. (Be specific)			
2			· · · · · · · · · · · · · · · · · · ·	
		<del></del>		
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1.20				
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If an amendment provides for an ex	.1		of innered aboves	
it an amendment provides for an ex-	<u>cnange, reclassificat</u> tendment if not conf	<u>ion, or cancellation</u> tained in the amendi	or issued snares, ment itself:	
provisions for implementing the an		Milita III the Militar		
provisions for implementing the an				
provisions for implementing the an (if not applicable, indicate N/A)				
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	09/10/2015	
The date of each amendment(s) add this document was signed.	doption:	, if other than th
09/1	0/2015	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amend fficient for approval.	ment(s)
	proved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and share	eholder
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and sharehol	der
09/10/2015		
Dated	Jom :	
Signature	rectar president or other officer – if directors or officers have not	haen
selected	d, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
	Juan C. Guiardinu.	
	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	<del></del>