

PO6 000032397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

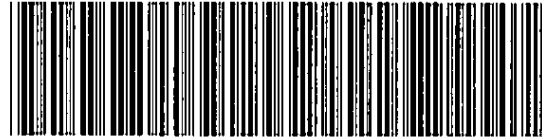
(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

cc
N/Aunchg

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Florida Commercial Security Services, Corp.

DOCUMENT NUMBER: P06000032397

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

Please return all correspondence concerning this matter to the following:

Lenika Saintilmar

Name of Contact Person

Florida Commercial Security Services, Corp.

Firm/ Company

15055 NW 7th Ave

Address

Miami, FL 33168

City/ State and Zip Code

Gb@FCSS.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lenika Saintilmar

Name of Contact Person

at (305)

450-1048

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 20, 2021

LENIKA SAINTILMAR
15055 NW 7TH AVE
MIAMI, FL 33168

SUBJECT: FLORIDA COMMERCIAL SECURITY SERVICES, CORP
Ref. Number: P06000032397

We have received your document for FLORIDA COMMERCIAL SECURITY SERVICES, CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 921A00003827

2021
10/1

FCSS, Corp

South Florida Regional Office
15055 NW 7th Ave
Miami, Florida 33168
(800) 578-4210, 24 Hours

Affidavit

STATE OF Florida

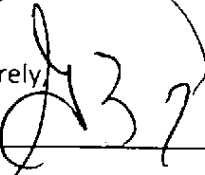
COUNTY OF Miami-Dade

The undersigned GERMAN BOSQUE being dully sworn, hereby deposes and says:

I declare that, to the best of my knowledge and belief, the information herein is true, correct, and complete.

The principals are the same in both entities.

Sincerely,



03/04/2021
Date

German Bosque,

President

Agency License #B26-00057

SOUTH FLORIDA

(786) 970-7233

ORLANDO

(407) 395-4115

TAMPA

(813) 642-3100

JACKSONVILLE

(904) 999-4890

Articles of Amendment
to
Articles of Incorporation
of

FILED
2021 MAR -9 PM 2:51
SECRETARY OF STATE
TALLAHASSEE

(Name of Corporation as currently filed with the Florida Dept. of State)

Florida Commercial Security Services, Corp.

(Document Number of Corporation (if known))

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:

FCSS, Corp.

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**)

N/A

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

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

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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

Check if applicable

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

1) ____ Change	_____	_____	_____
____ Add			_____
____ Remove			_____
2) ____ Change	_____	_____	_____
____ Add			_____
____ Remove			_____
3) ____ Change	_____	_____	_____
____ Add			_____
____ Remove			_____
4) ____ Change	_____	_____	_____
____ Add			_____
____ Remove			_____
5) ____ Change	_____	_____	_____
____ Add			_____
____ Remove			_____
6) ____ Change	_____	_____	_____
____ Add			_____
____ Remove			_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

[illegible]

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)

The date of each amendment(s) adoption: 01/01/2021, if other than the date this document was signed.

Effective date if applicable: 01/01/2021
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

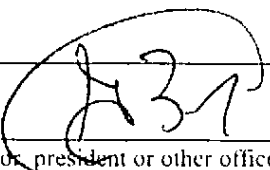
Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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)"

Dated 12/30/2020

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)

GERMAN BOSQUE
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)