# P07000080115

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# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION: CUSTOM	I SECURITY GROUP OF	FLORIDA INC.,		
DOCUMENT NU	MBER:	P07000080115			
The enclosed Artic	eles of Amendment and fee a	are submitted for filing.			
Please return all co	orrespondence concerning th	is matter to the following:			
	Omar Ochoa				
	1	Name of Contact Person			
	CUSTOM SECU	RITY GROUP OF FLORIDA IN	NC.,		
		Firm/ Company			
	9737 NW 41st Street #155				
		Address			
		Miami, FL 33178			
	C	City/ State and Zip Code			
	E-mail address: (to be use	d for future annual report notification)			
For further informa	ation concerning this matter,	please call:			
		at () Area Code & Daytime Te	<del></del>		
Name	of Contact Person	Area Code & Daytime Te	lephone Number		
Enclosed is a check	for the following amount n	nade payable to the Florida Depar	tment 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 Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation of

SURFACE OF SEC. 15 JAN. 10

## CUSTOM SECURITY GROUP OF FLORIDA INC.

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

### P07000080115

(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:

		abbreviation "P.A."
Enter new principal office address, if appl		
ncipal office address <u>MUST BE A STREE</u> T	( <u>ADDRESS</u> )	
Enter new mailing address, if applicable:		
Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>	
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f amending the registered agent and/or re		
new registered agent and/or the new regist		orida, enter the name of the
new registered agent and/or the new regist		orida, enter the name of the
		orida, enter the name of the
new registered agent and/or the new regist		
Name of New Registered Agent:	tered office address:	

removed a		, enter the title and name of each officer ach Officer and/or Director being added	
<u>Title</u>	Name	<u>Address</u>	Type of Action
<u>P</u>	Omar Ochoa	9737 NW 41st Street #155 Miami, FL 33178	
<u>VP</u>	Fadi Halwani	9737 NW 41st Street #155 Miami, FL 33178	🛘 Remove
is authoriz	zed to issue is: 1000; and th	(Be specific) of that the number of shares the corne ne prior issued 1 share of the corporand declared to be legally voided ar	ration
further for	ce, effect or value.		
provisio		ange, reclassification, or cancellation of dment if not contained in the amendmen	
	-		