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COVER LETTER

TO: Amendment Section Division of Corporations

MAIL

NAME OF CORPORATION: ALC ENFORCEMENT INC				
DOCUMENT NUMBER: P 07000110194				
The enclosed Articles of Amendment and fee are submitted for filling.				
Please return all correspondence concerning this matter to the following:				
TRACY HAUGER Name of Contact Person				
ALC ENFORCEMENT TNC. Firm/Company				
13422 774 PL. N. Address				
WPB FL. 33412-				
City/ State and Zip Code				
HAUGERMAKODAOL.COM E-mail address: (to be used for future annual report notification)				
E-mail audiess. (to be used for future annual report notification)				
For further information concerning this matter, please call:				
TRACY HAUGER = 561, 722-0294				
Name of Contact Person Area Code & Daytime Telephone Number				
inclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303				

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)				
(Docur	ment Number of Corporation (if known)			
tursuant to the provisions of section 607.1006. Florid s Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment			
A. If amending name, enter the new name of the c	orporation:			
	The new			
ame must be distinguishable and contain the word "c Inc.," or Co.," or the designation "Corp," "Inc, chartered," "professional association," or the abbro	orporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word eviation "P.A."			
. Enter new principal office address, if applicable				
Principal office address <u>MUST BE A STREET AD</u>	<u>DRESS</u>)			
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>			
If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the office address:			
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:	, Florida			
	(City) (Zip Code)			
	_			
ew Registered Agent's Signature, if changing Re				
hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.			
Sign	nature 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.

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			'
Remove			
5) Change			·
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)	
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		<u> </u>
If an amendment provides for an exchan provisions for implementing the amend	nge, reclassification, or cancellation of issued shares, lment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
ee BAKER	33.33%	
HILIP HAUGER	33.33%	
RACY HAVGER	33,33°/0	
17.10 6161-		.
<u></u>		
		· · · ·

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bidocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval	t
by	(voting group)	
Dated	Vianthaian	
(By a di selected	rector, president or other-difficer — if directors or officers have not been I, by an incorporator — if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	
	TRACY HAUGER	
	(Typed or printed name of person signing)	• 3
	Secretary	
	(Title of person signing)	ŧ