# Po84203107

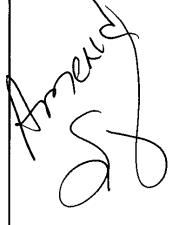
| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
| 20                                      |





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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORI           | PORATION:                              | ALERT MERCHANT SERVICES, INC.                          |                                      |  |  |
|------------------------|--|--|--------------------------------------|--|--|
|                        |  |  |                                      |  |  |
| DOCUMENT NU            | MBER:                                  | P08000003107   | ·                                    |  |  |
| The enclosed Artic     | cles of Amendment                      | and fee are submitted for filing.                      |                                      |  |  |
| Please return all co   | orrespondence conce                    | rning this matter to the following:                    |                                      |  |  |
|                        |  | RENE MORISSETTE  |                                      |  |  |
|                        |  | Name of Contact Person                                 |                                      |  |  |
|                        | ALI                                    | ERT MERCHANT SERVICES, INC.                            |                                      |  |  |
|                        |  | Firm/ Company  |                                      |  |  |
|                        | , 57                                   | 00 MEMORIAL HWY, SUITE 202A                            |                                      |  |  |
|                        |  | `Address   |                                      |  |  |
|                        |  | TAMPA, FL 33615  |                                      |  |  |
|                        |  | City/ State and Zip Code                               |                                      |  |  |
|                        | E-mail address:                        | (to be used for future annual report notification)     |                                      |  |  |
| For further inform     | ation concerning thi                   | s matter, please call:                                 |                                      |  |  |
| RENE MORISSETTE        |  | at ( 813 ) 932-0207                                    |                                      |  |  |
| Name of Contact Person |  | Area Code & Daytime Telephone Number                   | Area Code & Daytime Telephone Number |  |  |
| Enclosed is a chec     | k for the following a                  | mount made payable to the Florida Department of State: |                                      |  |  |
| ✓ \$35 Filing Fee      | \$43.75 Filing Fe<br>Certificate of St |  |                                      |  |  |
| Mailing Address        |  | Street Address   |                                      |  |  |

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation**

### ALERT MERCHANT SERVICES INC.

|   | to   |                        |                      |
|---|--|------------------------|----------------------|
|   | to Articles of Incorporation                           |                        |                      |
| •   | of   |                        | .35 m.               |
| ALEDT MEDOL   | JANIT SEDVICES IN                                      | •                      |                      |
| (Name of Corporation as curr  | HANT SERVICES, INC                                     |                        | 10/0.8r. 6           |
|   |  | zept. of State)        | A COLOR              |
|   | 000003107  |                        | LANGER PH,           |
| •   | nber of Corporation (if known                          | •                      | Section 1            |
| suant to the provisions of section 607.100 andment(s) to its Articles of Incorporation:   | 6, Florida Statutes, this Flori                        | ida Profit Corporation | adopts the following |
| If amending name, enter the new name o  | f the corporation:                                     |                        |                      |
|   |  |                        | The new              |
| ne must contain the word "chartered," "pro- Enter new principal office address, if application of the address MUST BE A STREE  Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI)  If amending the registered agent and/or a | ET ADDRESS )  ECE BOX)  registered office address in F |                        | e of the             |
| new registered agent and/or the new regi  | stered office address:                                 |                        |                      |
| Name of New Registered Agent:   | <del> </del>   | <del></del>            |                      |
| New Registered Office Address:  | (Florida street add                                    | ress)                  |                      |
|   |  | , Florida              |                      |
|   | (City)   | (Zip Code)             |                      |
| w Registered Agent's Signature, if changi<br>reby accept the appointment as registered of   | gent. I am familiar with and                           |                        | of the position.     |
| K.  | Signature of New Registered A                          | gent, if changing      |                      |

## 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) **Title** Name Address **Type of Action** ☐ Add Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) ARTICLE IV - "The number of shares the corporation is authorized to issue is 100,000,000 shares with a par value of \$.0001 per share. The number of preferred shares the corporation is authorized to issue is 10,000,000 shares with a par value of \$.0001 per share." 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) N/A

| The date of each amendmen                        | t(s) adoption: SEPTEMBER 2, 2010  |
|--|---|
| Effective date <u>if applicable</u> :            | SEPTEMBER 2, 2010   |
|  | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                         | (CHECK ONE)   |
|  | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.   |
|  | ere approved by the shareholders through voting groups. The following statement and 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)  |
|  | (voting group)  |
| The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder   |
| Dated  | 9-2-2010<br>Rene Morissette   |
| Signature <u>(</u>                               | Rene Morissette   |
| (By<br>sele                                      | a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
|  | RENE MORISSETTE   |
|  | (Typed or printed name of person signing)   |
|  | PRESIDENT   |
|  | (Title of person signing)   |
|  |   |