# P08000051851

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Amend 10 n.31.14

## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: Sangar Cargo Security Inc.  DOCUMENT NUMBER: P08000057857
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Haven Perkins, Esq.  Name of Contact Person  Sangar Cargo Security Inc  Firm/ Company  337 S Westmonte Dr  Address  Altamonte Springs FL 32714  City/ State and ZipCode  h perkins G Sangar Cargo Security. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Haven Perkins at (407) 657-0555  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certificate of Status  (Additional Copy is enclosed)

TO: Amendment Section

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

# **Street Address**

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

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)	
Samore Caron Sound Too DOO	0000578
Sangar Cargo Security Inc POSO (Document Number of Corporation (if known)	5000000
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ing amendment(s) to
A. If amending name, enter the new name of the corporation:	
A. in amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name mus 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)	_
	_
	_
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>
	<b>F</b> 13
	- 5 3名m
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:	0
Name_of_New Registered Agent	
	🔆 نن
(Florida street address)	
New Registered Office Address:, Florida,	
(City) (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	I.
Signature of New Registered Agent, 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)

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	PT John Do	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	ones .	
X Add	SV Sally Si	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Director	John Glavin	237 5 Westmente Dr. Ste200
Add			Altamente Springs, FL 32714
Remove			
2) Change	PCD	Haven Perkins	237 S Westmonte Dr
Add	(President, CEO	Director)	# 300
Remove		· · · · ·	Altamente Springs, FL 30714
3) Change			
Add			
Remove			
4) Change		•	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding tach <i>additional sheet</i>	s, if necessary).	(Be specific)			
	-				
		<del></del>	····		
- 400					
					·
an amendment prov	vides for an excha	noe, reclassifica	tion, or cancellat	ion of issued share	e.
<u>rovisions for implem</u>	nenting the amen	dment if not con	tained in the ame	endment itself:	
(if not applicable.	indicate N/A)				

The date of each amendment(s) adoption: 5/1/14 date this document was signed.	, if other than th
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
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)  Haven Perkins  (Typed or printed name of person signing)	
(Title of person signing)	