## P08000098604

(Requestor's Name)	
(Address)	
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(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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SECRETARY OF STATE

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION: DK Tactic		nc.
	f Amendment and fee are su		
_		-	
Please return all corresp	ondence concerning this man	tter to the following:	
1	Melissa Kiest		
- !	DK Tactical Se	Name of Contact Person Prvices, Inc.	1
- -	709 Cape Cora	Firm/ Company al Parkway We	est
_		Address	
(	Cape Coral, Fl	33914	
		City/ State and Zip Code	e
dkta	ac@ymail.com E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Melissa Kie	st	<sub>at (</sub> 630	,816-0574
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Amer Divis	ng Address Idment Section Idment Section Idment Section Idment Sections Idment Sections Idment Section Idment Section Idment Section Idment Id	Amend Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

DK Tactical Services, Inc	<b>)</b> .			
(Name of Corporation as curren P08000098604	tly filed with the Florida	Dept. of State)		
	er of Corporation (if know	n)	<del></del>	
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	lorida Statutes, this <i>Florida</i>	a Profit Corporation ado	pts the following	; amendment(s) to
A. If amending name, enter the new name of the BHK Tactical Solutions, I				The way
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "(word "chartered," "professional association," or	word "corporation," "co		ated" or the ab	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET	rable: ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE				
D. If amending the registered agent and/or reg new registered agent and/or the new register		Florida, enter the name	of the	
Name of New Registered Agent				
	(Florida street addr	ess)		
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		d accept the obligations	of the position.	
Signature o	of New Registered Agent, i	fchanging	SECRETARY TALLAHASSI	ZOISHAR 18 A

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>De</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				<u> </u>
3 ) Change				
Add				
Remove				<del></del>
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				<del></del>
6) Change		<u> </u>		
Add				
Remove				

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
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	and the same of the same the s
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	<u> </u>
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
rovicione for implamenting the amo	municit il not containeu in the amenunicit (15cm.
rovisions for implementing the ame (if not applicable, indicate N/A)	
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rovisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment(s) ad	loption:
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	for the amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
<sub>Dated</sub> 3-11-1	3
Signature (By a di selected	rector, president or other officer – if directors or officers have not been l, by artincerporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Melissa J Kiest
-	(Typed or printed name of person signing)
	Executive Secretary
·	(Title of person signing)