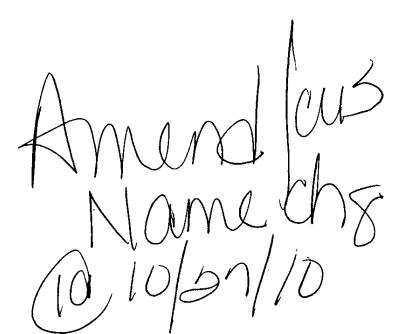
(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	<i>⊋#</i>)
PICK-UP	☐ WAIT	MAIL
(Ві	isiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



400186379224

10/18/10--01022--020 **43.75



COVER LETTER

NAME OF CORPORATION: TOLON / GL Services Inc. formally: GL Investigations, Consulting & Protection Group, Inc.

The enclosed Articles of Amendment and fee are submitted for filing.

TO: Amendment Section

Please return all correspondence concerning this matter to the following:

James Scarberry	
Name of Contact Person	
Talon / Glo Services Inc	
Firm/ Company	
2149 N. Commerce Brkway	
Address	
Weston, FL 33326-3238	
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Vicki Lowe at (954) 302-6235

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

\$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 Tallahassee, FL 32314

Street Address

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



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

RECEIVED 10 OCT 27 AM 8: 06

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CK#1100

October 19, 2010

JAMES SCARBERRY . G6 INVESTIGATIONS, CONSULTING 2149 N. COMMERCE PARKWAY WESTON, FL 33326-3238

SUBJECT: G6 INVESTIGATIONS, CONSULTING & PROTECTION GROUP,

INC.

correction(s):

Ref. Number: P09000010947

We have received your document for G6 INVESTIGATIONS, CONSULTING & PROTECTION GROUP, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 810A00024638

one week before

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Articles of Amendment

to
Articles of Incorporation
of

G6 Investigations, Col	resistance & Protection Group,
Paganna10947	
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statu- amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following SSE
A. If amending name, enter the new name of the corporation	
Talon /Glo Services name must be distinguishable and contain the word "corp	The new Series of the new Seri
abbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associations of the contain the con	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	2149 N. Commerce Pkwy
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Weston FL 33326-3238
	·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2149 N Commerce Pkwy. Weston, FL 33326-3238
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent: James 2149	Scarberry V. Commerce Parkway
1 3 0 4 3	ida street address)
(City)	,
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	ilian with and accept the obligations of the position.
Signature of New	Restricted 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) <u>Title</u> **Type of Action Name** <u>Address</u> ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

The date of each amendment(s)	
Effective date if applicables t	(date of adoption is required)
Effective date <u>if applicable</u> : • <u>(//</u>	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	oting group) ,"
(ve	oting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Dated_Oct	ober 25, 2010
(By a c	director, president or other dicer – if directors or officers have not been d, by an incorporator – it in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
_	(Typed or printed name of person signing)
_	V.A. C.O.O. (Title of person signing)
	(Title of person signing)