P09000073445

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Amend

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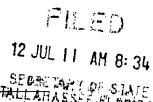
T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

·		,
NAME OF CORPORATION: SUPERIOR	ON SITE SECURI	TY SERVICES, INC
DOCUMENT NUMBER: P0900007344		
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
DANIEL MARZA	NO	
 -	Name of Contact Person	0
COSCULLUELA		
	Firm/ Company	
14211 COMMER	RCE WAY, SUITI	∃ 300
·	Address	
MIAMI LAKES, F	L 33016	
	City/ State and Zip Cod	e
DMARZANO@CMP	ALAW.COM	
	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
DANIEL MARZANO	at (305	, 817-2170
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



SUPERIOR ON SITE SECURITY SERVICES, INC

(Name of Corporation as currently filed with the Florida Dept. of State) P09000073445 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 2640 WEST 84TH STREET B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) HIALEAH, FL 33016 C. Enter new mailing address, if applicable: 2640 WEST 84TH STREET (Mailing address MAY BE A POST OFFICE BOX) HIALEAH, FL 33016 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: N/A Name of New Registered Agent 2640 WEST 84TH STREET (Florida street address) Florida 33016 HIALEAH New Registered Office Address: (City) 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.

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	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) N/A Change Add Remove	N/A	N/A	N/A	
2) Change Add Remove		.		
3) Change Add Remove				
4) Change Add Remove				
5) Change Add Remove		<u> </u>		
6) Change Add Remove		_		

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
N/A			
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 amendment((s) adoption: 07/03/2012		
Effective date if applicable:	07/03/2012		
Difference and appreciable.	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.		
	e approved by the shareholders through voting groups. The following statement d 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/were action was not required.	e adopted by the board of directors without shareholder action and shareholder		
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder		
Dated	1/10/12		
Signature	Mule Way		
	y 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)		
	(Typed or printed name of person signing)		
(Typed or printed name of person signing)			
	PHESTORAT		
	(Title of person signing)		