

## Division of Corporations **Electronic Filing Cover Sheet**

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nter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN **B-66 SECURITY SOLUTIONS INC.**

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9/12/2016



## H160002206224

## **COVER LETTER**

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: B-66 SECURITY SOLUTIONS INC. DOCUMENT NUMBER: P10000015902
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BENITO R GOMEZ  Name of Contact Person
·
Firm/ Company
8501 NW 107 COURT UNIT 6
DORAL FL 33178  City/ State and Zip Code
_ <b>}</b>
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:
Name of Contact Person at (786) 306-6537  Area Code & Daytime Telephone Number
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:
Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy  (Additional copy is enclosed)  Certified Copy  (Additional Copy is enclosed)
Malling Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

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Articles of Amendment	
to	2. 9%
Articles of Incorporation of	
B-66 SECURITY SOLUTIONS INC.	- ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
(Name of Corporation as currently filed with the Florida Dept. of State)	
P 10000015902 (Document Number of Corporation (if known)	_ <del>_</del>
•	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation:	to
A. If amending name, enter the new name of the corporation:	
NAVAL LOGISTIC INC The new	
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."	
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)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address;	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: , Florida , 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.	
Signature of New Registered Agent, if changing	

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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 officer 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 SV Sally Smith Type of Action Title <u>Name</u> Address (Check One) 1) \_\_\_\_ Change \_\_ Add Remove 2) \_\_\_\_ Change \_ Add Remove 3 ) \_\_\_\_ Change \_ Add \_ Remove 4) \_\_\_\_ Change \_\_\_\_\_ Add Remove 5) \_\_\_\_ Change Add Remove

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6) \_\_\_\_ Change

\_\_\_\_ Add

\_\_ Remove

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en amendment provides for an exch	ıange, reclassifi	cation. or can	cellation of iss	ped shares.	
rovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not c	ontained in the	amendment	itself:	
(y nos appricació, indicate tox)					
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The date of each amendment(s) adoption: 09/12/2016 if other than the date this document was signed.
Effective date if applicable:  (no more than 90 days after amendment file date)
(no more such 20 tays the amenament file take)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amondment(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)
(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.
Dated 09/12/2016 Signsture THUMMANAGUNA
(By a director, presidential still of the following of the first of th
appointed fouciary by that fiduciary)
BENITO R GOMEZ
(Typed or printed name of person signing)
DiRECTOR
(Title of person signing)

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