PIDDOO3BY4

(Re	questor's Name)	
(110	,quoto, a riumo,	
hA)	ldress)	<u> </u>
(/10	141033)	
	ldress)	
(Au	iuiess)	
	ty/State/Zip/Phone	a #N
(Cit	ty/State/Zip/Filoni	z π)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100270039111

03/10/15--01015--017 **35.00

TIME D

MAR 11 2015 R. WHITE

COVER LETTER

Division of Corporations NAME OF CORPORATION: MANRICKY PROTECTION INC DOCUMENT NUMBER: P10000032544 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MANRICKY BERTHET Name of Contact Person SECURITY/TRAFFIC CONTROL Firm/ Company 12760 NW 6 LANE Address MIAMI/FL/33182 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MANRICKY BERTHET Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Articles of Incorporation FILE

ωf

P10000032544

15 MAR 10 PH 1:18

(Name of Corporation as currently filed with the Flo	rida Dept. of State)				
MANRICKY PROTECTION INC	WALLAMASSEL FLOREN				
(Document Number of Corporation (if k	cnown)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to				
A. If amending name, enter the new name of the corporation:					
MANPOWER INC	The new				
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the				
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1011 NW 111 Ave Miami, FL 33172				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1011 NW III Ave Miamijfl 33172				
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the				
Name of New Registered Agent (Florida street	address)				
New Registered Office Address: (City)	, Florida 3317 3 (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

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 Da	<u>oe</u>				
X Remove	<u>V</u>	Mike Jones					
X Add	SV Sally Smith						
Type of Action (Check One)	Title		<u>Name</u>	Address			
1) Change		_					
Remove							
2) Change		-					
Add Remove							
Change Add		-					
Remove							
4) Change		_					
Add Remove							
5) Change		_					
Add Remove							
6) Change		_					
Add		_					
Remove							

f amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
 	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
· 	

The date of each amendment(s) adoption: 3/5/2015	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adaption 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.	
Dated_3/5/2015	
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)	
MANRICKY BERTHET	
(Typed or printed name of person signing)	_
OWNER/ Presiden 1	
(Title of person signing)	