P11000089322

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800237195968

07/09/12--01014--004 **35.00



N

DUE 10 2012 C. MUSTAIN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Florida Procument Number: P11000089	otection Securi 322	ty Services Inc.
The enclosed Articles of Amendment and fee are so		
Please return all correspondence concerning this ma	atter to the following:	
Prevot,Rony		
	Name of Contact Persor	1
Florida Protect		
	Firm/ Company	
692 NE 85 Stre		
	Address	
Miami,Florida 3	33138	
	City/ State and Zip Cod	e
ronyprevot@yaho E-mail address: (to be u	O.COM used for future annual report	notification)
For further information concerning this matter, plea	se call:	
prevot,Rony	at (305	200-6714
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 Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as	currently filed with the Flo			
P11000089322				
(Documen	t Number of Corporation (if	known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Florida Profit Corporation adopts	the following amendment(s)	to
A. If amending name, enter the new na	me of the corporation:			
God Protection Securi	ty Services Inc.		The new	
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "Inc," or "C	Co". A professional corporation P.A."	name must contain the	
B. Enter new principal office address, i		692 NE 85 Street	 	
(Frincipal office address MOST BE A ST	KEET ADDKESS)	Miami,florida 33	138	
C. Enter new mailing address, if applie		P.O.Box331173	12 J	weg
		Miami,fl 33238	<u>-</u> - ∃	**
Ϋ́Δ.			-9 PH 9-	
D. If amending the registered agent annew registered agent and/or the new Name of New Registered Agent			to the second	
Name of the Windstelland	692 NE 85 Str	eet #8		
	(Florida stre	**** *********************************		
New Registered Office Address:	Miami	, Florida 33	138	
	(City)		Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as registe Signature.			the position.	

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 Do	<u>e</u>		
X Remove	<u>V</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sm	<u>nith</u>		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) Change					
Add					
Remove					
2) Change		_		_	
Add				-	
Remove					
3) Change	<u></u>			-	
Add					
Remove		•			
4) Change				_	
Add					
Remove					
5) Change					
Add		_		•	
Remove				-	
				,	
6) Change		_		-	
Add					
Remove					

(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: 10/11/2011-01/15/2012
Effective date if applicable: 0	7/05/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ac by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voling group)
■ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were are action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 07/0	5/2012
Signature	-DR
	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)
	Prevot,Rony
	(Typed or printed name of person signing)
	President:
	(Title of person signing)