P12000015293

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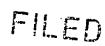
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: National Investigat	ive Training Academy, Inc				
DOCUMENT NUM	P12000015293					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	Steve Cassell					
		Name of Contact Person	1			
	National Investigative Training Academy, Inc.					
		Firm/ Company				
	250 International Parkway, S	uite 134				
		Address				
	Lake Mary, FL 32746					
		City/ State and Zip Cod	e			
	steve@nitainc.com					
	_	sed for future annual report	notification)			
	on concerning this matter, pleas					
Steve Cassell		at (de & Daytime Telephone Number			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:			
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



National Investigative Training Academy, Inc.

National investigative Training Academy			- 2826 ASS	14.
(Name o	of Corporation as curren	tly filed with the Florida De	eptf of State); -8 A	月11: 03
P12000015293			363, 5	- >
	(Document Number	of Corporation (if known)	1.1.	-3.121.E
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation	adopts the following	amendment(s) t
A. If amending name, enter the new na	ame of the cornoration:			
THE TOTAL CONTRACTOR OF THE SECOND				
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	lorp," "Inc," or "Co".	A professional corporation	d" or the abbreviation	The new "Corp" the word
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		<u></u>		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>)				
D. If amending the registered agent an new registered agent and/or the new	v registered office addre		name of the	
Name of New Registered Agent	Steve Cassell	·		
	250 International Parkwa	ıy, Suite 134		
	(Florida .	street address)		
New Registered Office Address:	Lake Mary		. Florida 32746	
New Registered Office Budress.		(City)	(Zip Co	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Age tered agent. I am familia	nt: r with and accept the obligati	ions of the position.	
	Signature of New	Registered Agent, if changin	· · · · · · · · · · · · · · · · · · ·	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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>v</u>	
X Remove	<u>V</u>	Mike Jos	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		<u> </u>		
Add				
Remove				

Attach additional s	ding additional Art heets, if necessary).	(Be specific)					
		,					
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					-		
						 .	
							
			<u> </u>				
			_	-			
							
							
		•	_		-		
			-	-		_	
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f an amendment	provides for an excl	nange, reclassi	fication, or car	ellation of is	sued shares,		
provisions for im	plementing the ame	ndment if not	contained in t	he amendment	itself:		
(if not applica	ble, indicate N/A)						
		=		_			
·	·- <u>-</u> -					-	
				• •			
					-		
	• •-						
						_	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
date inis document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	ie will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder actic	on and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(sufficient for approval.	\$)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
Steve Cassell		
by	(voting group)	
April 2, 20 Dated Signature (By a c	24 Director, president or other officer – if directors or officers have not been	
selecte	ed, by an incorporator - if in the hands of a receiver, trustee, or other cour	t
аррон	ited fiduciary by that fiduciary)	
	Steve Cassell	
	(Typed or printed name of person signing)	
	P/VP	
	(Title of person signing)	