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Dividing Corporations

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P12000026837

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : GULATI LAW
Account Number : I20130000014
Phone : (407) 900-5054
Fax Number : (407) 517-4931

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: office@gulati-law.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
ELITE PROTECTION & TRANSPORTATION SERVICES, INC.**

34

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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12/27/2013 4:03:00 PM PAGE 1/001

Fax Server



December 27, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

ELITE PROTECTION & TRANSPORTATION SERVICES, INC.
10640 MOORE RD
GOTHA, FL 34734

SUBJECT: ELITE PROTECTION & TRANSPORTATION SERVICES, INC.
REF: P12000026837

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

SHOULD CYNTHIA ALEJOS REMAIN AS VPT OF THE CORPORATION???? IF NOT, PLEASE CORRECT YOUR DOCUMENT ACCORDINGLY.

~~YES~~ NO.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlane Connell
Regulatory Specialist II

FAX Aud. #: H13000282849
Letter Number: 613A00029211

Thank You.

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13 DEC 30 AM 8:38

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ELITE PROTECTION & TRANSPORTATION SERVICES, INC.

DOCUMENT NUMBER: P12000026837

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sarah Gulati, Esq.

Name of Contact Person

GULATI LAW, P.L.

Firm/ Company

409 MONTGOMERY RD, SUITE 131

Address

ALTAMONTE SPRINGS, FL 32714

City/ State and Zip Code

OFFICE@GULATILAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SARAH GULATI, ESQ.

Name of Contact Person

at (407) 900-5054

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

ELITE PROTECTION & TRANSPORTATION SERVICES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000026837

(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:

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 agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, 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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13 DEC 30 PM 4:56
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TALLAHASSEE, FLORIDA

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|---|-------|-----------------|-----------------|
| 1) <input type="checkbox"/> Change | PS | JESSICA ALEJOS | 10640 MOORE RD |
| <input type="checkbox"/> Add | | | GOTHA, FL 34734 |
| <input checked="" type="checkbox"/> Remove | | | |
| 2) <input checked="" type="checkbox"/> Change → | PS | CYNTHIA ALEJOS | 10640 MOORE RD |
| <input checked="" type="checkbox"/> Add | | | GOTHA, FL 34734 |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change ↗ | VPT | JESSE G. ALEJOS | 10640 MOORE RD |
| <input checked="" type="checkbox"/> Add | | | GOTHA, FL 34734 |
| <input type="checkbox"/> Remove | | | |
| 4) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |

[illegible]

| | |
|----------------------|-----|
| CYNTHIA ALEJOS..... | 60% |
| JESSE G. ALEJOS..... | 40% |

The date of each amendment(s) adoption: 12/23/2013, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption 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

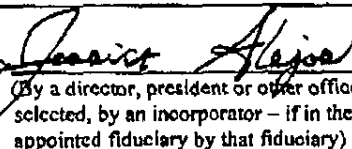
by _____"
(voting group)

☒ 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 12/23/2013

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)

JESSICA ALEJOS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)