

P12000040025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

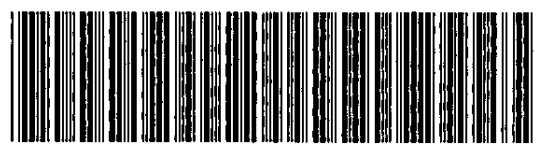
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500238031045

08/03/12--01013--001 **5.00

500238031045
07/02/12--01043--024 **30.00

8/3/12 RW
Amend

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
12 AUG -3 PM 12:31



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2012

AYMARA MACIAS
TALISMAN SECURITY FORCE, CORP.
2400 SW 83 AVE
MIAMI, FL 33155

SUBJECT: TALISMAN SECURITY FORCE, CORP.
Ref. Number: P12000040025

We have received your document for TALISMAN SECURITY FORCE, CORP. and check(s) totaling \$5.00. However, your check(s) and document are being returned for the following:

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Please provide us with an email address for this business entity. The Division of Corporations sends important reminders and notices to those business entities that have provided our office with an email address. Make sure your entity receives these helpful communications by providing our office with an active email address.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 412A00019126

RECEIVED
2012 AUG -2 AM 10:20
TO ACRIMEDUE
SUFFICIENCY OF FILING

11:00

Update Payment

08/02/12

DEP Page 0001/0001

Deposit Number	: 07/02/12 01043 024	Deposit Amount	: 30.00
Account Number	:	Deposit Balance	: 0.00
Refund Request Date	:	Debit Memo Date	:
Refund Mail Date	:	Void Date	:
Refund Amount	: 0.00	User ID	: GSMITH
Requester	:		

		DOC Page	0001/0001
Tracking Number	: J12000500994	Document Number	: J12000500994
Ledger Date	: 07/02/12	Sub Account Number	:
Document Requester	:		

<u>Category</u>	<u>Description</u>	<u>Amount</u>
JLN	JUDGMENT LIEN	30.00

<Ctrl>A - Add Pay <Ctrl>R - Rem pay <Ctrl>D - Print doc <Ctrl>V - Print check

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TALISMAN SECURITY FORCE, CORP.
DOCUMENT NUMBER: P12000040025

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

Please return all correspondence concerning this matter to the following:

Aymara Macias
Name of Contact Person
TALISMAN SECURITY FORCE, CORP.
Firm/ Company
2400 SW 83 Ave
Address
MIAMI, FL 33155
City/ State and Zip Code

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

For further information concerning this matter, please call:

Aymara Macias at (786) 333-9475
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

2012 JUL 18 AM 9:55

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 AUG -3 PM 12: 31

P1200040025

Page 1 of 4

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

1) <u>Change</u> <u>Add</u> <u>X</u> Remove	<u>P</u>	<u>Pedro Guido Alvarez Torres</u>	
2) <u>Change</u> <u>X</u> Add <u>Remove</u>	<u>P</u>	<u>Aymara Macias</u>	<u>2400 SW 83 Ave</u> <u>MIAMI, FL 33155</u>
3) <u>X</u> Change <u>Add</u> <u>Remove</u>	<u>V</u>	<u>Pedro G. Alvarez Torres</u>	
4) <u>Change</u> <u>Add</u> <u>Remove</u>			
5) <u>Change</u> <u>Add</u> <u>Remove</u>			
6) <u>Change</u> <u>Add</u> <u>Remove</u>			

[illegible][illegible]

The date of each amendment(s) adoption: 07/12/12

Effective date if applicable: 07/13/12
(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 07/12/12

Signature [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)

Aymara Macias
(Typed or printed name of person signing)

✓
(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 03, 2012

TALISMAN SECURITY FORCE, INC.
C/O PEDRO G. ALVAREZ
2400 SW 83 AVE.
MIAMI, FL 33155

We have received your judgment Lien document and deposited your check(s) totaling \$30.00. However, this document has not been filed and is being returned for the following:

Incorrect filing form. To amend your officers/directors you will have to file an amendment to your articles of incorporation. You cannot file a Judgment Lien Amendment Statement to amend your officers/directors. Judgment Lien Amendment Statements are used to amend a judgment lien certificate that was filed with our Division in regards to a Final Judgment Order issued by a Florida Court.

The appropriate forms are enclosed for your use and submittal to the Amendment Section, Division of Corporations. The appropriate address is located at the bottom of the form. Please submit the enclosed judgment lien amendment statement with the correct amendment form, which is enclosed, and a letter requesting that your officers/directors be amended and indicate that you would like the money that you paid for this filing to be applied to the appropriate filing.

If you should have any further questions, please call the Judgment Lien Filing Section at 850-245-6011.

Mel Solomon

Division of Corporations

Doc Reference:

Letter Number: 120703144500#1J12000500994

Division of Corporations -P.O. Box 6250 - Tallahassee, Fl. 32314
www.sunbiz.org

JUDGMENT LIEN AMENDMENT STATEMENT

THE FOLLOWING INFORMATION IS SUBMITTED IN ACCORDANCE WITH s. 35.206, FLORIDA STATUTES, TO AMEND INFORMATION SHOWN ON THE RECORDS OF THE DEPARTMENT OF STATE.

JUDGMENT DEBTOR(S)

1. JUDGMENT DEBTOR (DEFENDANT) NAME AS SHOWN ON THE RECORDS OF THE DEPARTMENT OF STATE:

TALISMAN Security Force, Corp.
INDIVIDUAL OR BUSINESS ENTITY NAME
2400 SW 13th Ave
MAILING ADDRESS
Miami FL 33155
CITY ST ZIP

2. ADDITIONAL JUDGMENT DEBTOR, IF APPLICABLE:

Aymara Macias
INDIVIDUAL OR BUSINESS ENTITY NAME
same
MAILING ADDRESS
CITY ST ZIP

JUDGMENT CREDITOR(S)

3. JUDGMENT CREDITOR (PLAINTIFF) NAME AS SHOWN ON THE RECORDS OF THE DEPARTMENT OF STATE:

CREDITOR NAME(S)
MAILING ADDRESS
CITY ST ZIP

DO NOT PHOTOCOPY THIS FORM PRIOR TO USE.
BAR CODE MUST BE LEGIBLE.



J12000500994
07/02/12--81043--024 **30.00

THIS SPACE FOR USE BY FILING OFFICER

4. ENTER FILE NUMBER ASSIGNED TO ORIGINAL JUDGMENT LIEN BY DEPARTMENT OF STATE

5. DATE JUDGMENT LIEN FILED WITH DEPARTMENT OF STATE

6. ☒ AMENDMENT
☐ PARTIAL RELEASE
☐ ASSIGNMENT
☐ TERMINATION

THE JUDGMENT LIEN INDICATED ABOVE IS AMENDED AS SET FORTH BELOW.

THE JUDGMENT LIEN INDICATED ABOVE HAS BEEN PARTIALLY RELEASED AND THE VALUE OF THE LIEN REMAINING

THE JUDGMENT LIEN CERTIFICATE INDICATED ABOVE HAVE BEEN ASSIGNED TO THE NEW
AS LISTED BELOW.

ON THE PERSONAL PROPERTY UNDER THE JUDGMENT LIEN BEARING THE NUMBER

7. SHOW NAME AND ADDRESS OF ASSIGNEE AND SIGNATURE (ATTACH PAGE, IF NECESSARY)

*Change the previous name to Aymara Macias and V. Prisdewi
Pedro Guido Alvarez Torres.*

UNDER PENALTY OF PERJURY, I hereby certify that: (1) All of the information set forth above is true, correct, current and complete; and (2) I have complied with all applicable laws in submitting this Judgment Lien Amendment Statement for filing.

Signature of Judgment Creditor or Authorized Representative

Printed Name

NON-REFUNDABLE PROCESSING FEE:

JUDGMENT LIEN AMENDMENT STATEMENT \$20.00

IF MORE THAN ONE DEBTOR BEING ADDED, FOR EACH ADDITIONAL \$5.00

EACH ATTACHED PAGE, IF NECESSARY \$ 5.00

CERTIFIED COPY REQUESTED \$10.00 ☐

Division of Corporations • P.O. Box 6250 • Tallahassee, FL 32314 • 850-245-6011

Make Checks Payable to: Florida Department of State

Wells Fargo Business Online®

View Check Copy

Check Number	Date Posted	Check Amount	Account Number
1001	07/03/12	\$30.00	Talisman Checking XXXXXX8975

TALISMAN SECURITY FORCE, CORP
ONE BOX 777 STAPLE 213
IN PAID IN 32100 479

1001
BANK OF AMERICA
100220079

PAY TO THE ORDER OF Division of Corporations \$ 30.00
Thirty dollars and n/a DOLLARS & CENTS

DATE 6-26-12

FOR _____
#00000000001# #063307513# #152336975# #0003003000#

2264 22013

005-450459-1009068796
DEPOSIT ONLY 30.00
07/02/12--01043--024

6750107456

Equal Housing Lender

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