P12000047484

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	ocument Number)	·
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07/13/12--01003--003 ***





Amend 10,13,12

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: 5W SECURITY CONSTRUCTION INC DOCUMENT NUMBER: P12000047484
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Walter Rowley
Name of Contact Person
sw security construction in
Firm/ Company
907 NE 10TH LONE
Cape Coral H. 33909
City/ State and Zip Code
= constructionincorporaten @amail
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Walter Rowley =1,239, 225.3711
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:
\$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy (Addit

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

is enclosed)

Articles of A	mendment	DIVISION TALES
. to Articles of Inc	corporation	19 CORNER
sw security cor	rotruction	TB CHIO: LI
(Name of Corporation as currently filed with the F	lorida Dept. of State)	
P1200001	17484	
(Document Number of Corporation (i	f known)	·
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	~/A	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corpo	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1621 SE Street, F F1, 330	CABOARN ORT MYBRS
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	907 NE Cape Co.	10th Lone 10th 133909
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address		ame of the
Name of New Registered Agent 1021 SE	EABOARN eet address)	street.
New Registered Office Address: Font My (City)	BYS, Florid	da 339) Q (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to		ons of the position.
P/A		
Signature of New Registered A	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.

	PT V SV Title	John Doe Mike Jones Sally Smith	
	<u>sv</u>		
		Sally Smith	
X Add	Title		
Type of Action (Check One)		<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	0	Samuel Turner	624 55 35th Street Core Poral fl 33904
2) Change	D	Mark Robinson	51/eet Cape Core
Remove 3) Change Add			fl. 33904
Remove 4) Change Add			
Remove 5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Share holdishs
P. Walter Rowley 80% shares
D. Samuel turner 10% shares
D Mark Robinson 10% shares
1009 01-100
100.10 SNEYS
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)
(g not applicable, maleute (m))
P. Walter Rowley 80% shores D. Samuel turner 10% shores D. Mark Robinson 10% shores
D Scan 15/ +1/100/ 100 100 100/ 100
D. Samuel Torner 10 16 shares
D. Maric Robinson 10% shares
TOTAL 100% Shores.

The date of each amendment(s) adoption:
Effective date if applicable: 79/12
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CUECY ONE)
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 7/9/12
Signature Walter Rowley
(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)
walter rowley
(Typed or printed name of person signing)
President
(Title of person signing)