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C. CARROTHERS

COVER LETTER

NAME OF CORPORATION:

EVAGUARD Security Inc.

DOCUMENT NUMBER:

Please return all correspondence concerning this matter to the following:

Thomas E Northrop

Name of Contact Person

EVAGUARD Security Inc.

Firm/ Company

12100 Semwole Blud # 283

Address

LARGO FL. 33778

City/ State and Zip Code

EVAGUARD 88 @ YAHOO. Com

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

For further information concerning this matter, please call:

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:

Mailing Address

□ \$35 Filing Fee

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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Street Address

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

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment to Articles of Incorporation

of				
EVAGUARD Secu	RITU Inc			
(Name of Corporation as currently filed with the Florida Dept. of State)				
P12000055689	9			
(Document Number of Corporation (if kn	lown)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new name of the corporation:				
	The new			
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.A.	". A professional corporation name must contain the 1."			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	12100 SemINOLE BLUD # 283 LARGO, FL, 33778 5			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MAR 23 AH			
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the			
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 Signature of New Registered Age.				

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 <math>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:	i, and buily binnin, by do an nad.	
X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change Add	TR JAMES KLEE	9420 LAZY LANE TAMPA, FL 33614
Remove 2) Change Add	T,5 LAURA Ann Northrop	
Remove 3) Change Add		Largo FL, 33778
Remove 4) Change Add	<u> </u>	
Change Add		
Change Add		
L Remove		

If amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
, , , , , , , , , , , , , , , , , , ,	
If an amendment provides for an exchange provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 3-18-15 date this document was signed.	, if other than th
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.	
Dated3 - 18 - 15	
Signature Thomas E. Northroje	
(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)	
THOMAS E NEDTURAN	
THOMAS E NORTHROP (Typed or printed name of person signing)	
(1 yped of printed name of person signing)	
President	
(Title of person signing)	