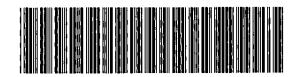
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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DEPARTMENT OF STAF

FILED 2012 SEP 25 AM IO: 28

SEP 2.5, 2012

T. ROBERTS

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPOR	ATION: Central Sec	curity Alarm Inc		
DOCUMENT NUMB	_{ER:} P1200007782	3		
The enclosed Articles of	of Amendment and fee are sul	bmitted for filing.		
Please return all corresp	condence concerning this mat	tter to the following:		
·	Raymond Fortent	berry		
		Name of Contact Person	n	
 -	Central Security A	Alarm Inc		
_		Firm/Company		
	15 Equine Dr			
_		Address		
(Crawfordville, FL	32327		
-		City/ State and Zip Cod	е	
ravr	nond.csialarm@g	ımail com		
Tayı		ed for future annual report	notification)	
	E-man address. (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:		
Raymond For	tenberry	at (850	694-2714	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depa	ertment 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)	
Maili	ng Address	Street	Address	
Amer	dment Section	Amendment Section		
	ion of Corporations		n of Corporations	
P.O. Box 6327 Clifton Building			C	
Tallahassee, FL 32314 2661 Executive Center Circle			xecutive Cetter Circle	

Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation** of

Central Security Alarm Inc

Security Alarm Inc

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

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

P12000077823

ent(s) to

me must be distinguishable and contain the corp.," "Inc.," or Co.," or the designation "Cord "chartered," "professional association," or	orp," "Inc," or "Co". A p		
Enter new principal office address, if applica rincipal office address <u>MUST BE A STREET A</u>			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	DOV)		
maing damess may be a rost of fice	<u></u>		
(Mutting uturess MAT DE A POST OFFICE			
		rida, enter the nam	e of the
	stered office address in Flo	rida, enter the nam	e of the
If amending the registered agent and/or regi	stered office address in Flo	rida, enter the nam	e of the
If amending the registered agent and/or reginew registered agent and/or the new register	stered office address in Flo		e of the
If amending the registered agent and/or reginew registered agent and/or the new register	stered office address in Flo red office address:		e of the

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> <u>Jo</u>	ohn Doe	
X Remove	<u>v</u> <u>v</u>	like Jones	
X Add	<u>SV</u> <u>S</u> i	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	T	Terry Null	13122 Regent Cir
X			FT Myers, FL 33966
Remove			
2) Change	***************************************		
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			- projection - pro
Add			
Remove			
6) Change			
Add			
Remove			

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)	. <u>If amending or adding ad</u> (Attach <i>additional sheets, i</i>	iditional Artic fnecessary)	(Re specific)	nge(s) nere:			
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The date of each amendment	9-24-2012
Effective date if applicable:	9-24-2012
Enecuve date <u>in appreciate</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement and 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)
	(voting group)
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 9-2	4-2012
Dated 9-2	PA-3
(B	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court epointed fiduciary by that fiduciary)
	Raymond Fortenberry
	(Typed or printed name of person signing)
	President
	(Title of person signing)