P120000 99084

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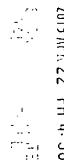
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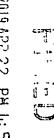


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R. WHITE MW 0 3 2019





COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Bureau OF Private Investigators, Inc
DOCUMENT NUMBER: P12000099084
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sherri Y Motley Name of Contact Person Bureau of Private Investigators, Inc Firm/ Company 7328 N. Augusta DR. Address Hialeah FL. 33015 City/ State and Zip Code motcrewall bell South net E-mail address: (to be used for future annual report notification)
E-man address. (to be used for future aimaan report notification)
For further information concerning this matter, please call:
Sherri Y. Motley at 786, 486-1489 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

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

	2019 AFR 22 PM 4: 56
Bureau of Private Inve	Stigators Inc
	irrently filed with the Florida Dept. of State)
P120000990	84
	nber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
N/a	The new
name must be distinguishable and contain the word "corp	ooration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ad	
Name of New Registered Agent	
(Flor	rida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered . I hereby accept the appointment as registered agent. I am fan	
i never, accept the approximent as registered agent. I am jur	and the decept of ornganos of the position.
Signature of	New Registered 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One) 1) Change	P	Janet Perez	LO NW 60 AUE
Add			Miami, FL 33126
X Remove			
2) Change	<u>P</u>	Sherri Y. Motley	7325 N Augusta Dr Hialeah FL. 33015
Add		mille	1+, aleah, +L. 33013
Remove	\bigvee	RalpHE. Wilson	17330 NW 67 1 = 6
Add			Hieleah FL: 33015
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).		
N/A		
		•
		
·		
	<u> </u>	
		<u> </u>
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
N/0		

The date of each amendment(s) adoption:	<u>Upril</u>	10, 2019	, if other than the
date this document was signed.	^		
Effective date if applicable:	Cocil_	10 2019	dment file date)
	(no more tha	n 90 days after amen	dment file date)
Note: If the date inserted in this block does n document's effective date on the Department of	or meet the ap State's records	plicable statutory tili s.	ing requirements, this date will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE)		
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. 1 approval.	The number of votes	east for the amendment(s)
☐ The amendment(s) was/were approved by th must be separately provided for each voting	e shareholders group entitled	through voting group I to vote separately or	s. The following statement in the amendment(s):
"The number of votes cast for the amer	idment(s) was/	were sufficient for ap	proval
hy(ro.		<u>.</u>	<u>.</u>
(vo.	ing group)		
☐ The amendment(s) was/were adopted by the action was not required.	board of direct	tors without sharehold	der action and shareholder
The amendment(s) was/were adopted by the action was not required.	incorporators v	without shareholder a	ection and shareholder
Dated April 18, 20)19		
Signature		<i>-</i>	
(By a director, pres	ident or other o	officer – if directors of	or officers have not been ver, trustee, or other court
appointed fiduciar			ver, audice. or office every
S	herri Y	Motley ted name of person si	
	(Typed or print	ted name of person si	gning)
	residen	1)
	(Ti	itle of person signing)