P13000010410

(Red	questor's Name)	
(Add	lress)	
(Add	dress)	
(City	//State/Zip/Phone	÷#)
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Amend (CC/CUS)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AR SECUE	RITY SERVICES	INC	
DOCUMENT NUM	BER: P1300001041	0		
	of Amendment and fee are su			
	spondence concerning this ma	-		
	ARISSAIDIS RAM	MOS		
	ANTOGAIDIO IVAI			
	AD OF OUR IDITY (O	Name of Contact Person	1	
	AR SECURITY S	ERVICES INC		
		Firm/ Company		
		Address		
	HIALEAH, FL 330	013		
		City/ State and Zip Cod	e	
aris	ssaidisramos1986	@live.com		
		sed for future annual report	notification)	
	•	,	,	
For further information	n concerning this matter, pleas	se call:		
ARISSAIDIS	RAMOS	at (, 499-2991	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)	
Ma	iling Address	Street	Address	
Am	endment Section	Amendment Section		
	ision of Corporations		on of Corporations	
	. Box 6327 lahassee, FL 32314		Building Executive Center Circle	
1 an	anassec, 14. 32314	Tallahassee, FL 32301		

Articles of Amendment Articles of Incorporation

ΔR	SECI	IRITY	SFRV	ICES	INC
H	\mathcal{L}	2011	\neg	11.75	TINE.

AN SECONT I SERVICES INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P13000010410	
(Document Number of Corporation (if known)	

(Document Number of Corporation	tion (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	, this Florida Profit Corporation adopts the following	g amendment(s)
A. If amending name, enter the new name of the corporation	on:	
N/A		The new
name must be distinguishable and contain the word "corpo" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbrevia	or "Co". A professional corporation name must c	
B. Enter new principal office address, if applicable:	8201 NW 66 ST	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	SUITE 10	
	MIAMI, FL 33166	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8201 NW 66 ST	
	SUITE 10	
	MIAMI, FL 33166	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		
N/A	intess.	
Name of New Registered Agent 1VIA		13
(Flor	ida street address)	722 710
New Registered Office Address: N/A	, Florida	19
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered A	Agent.	12: 05
I hereby accept the appointment as registered agent. I am fam		

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	PT	John Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	<u>mes</u>		
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1)Change					
Add					444,
Remove					Brown to the state of the state
2) Change					
Add		_			
Remove					
3) Change					
Add		_			
Remove					
4) Change					
Add					
Remove					
5)Change				A	
Add					
Remove					
6) Change	_				
Add		- · · -			
Remove					

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	<u></u> .
I/A	£ 5 7	
If an amendment provides for an exch provisions for implementing the amer	inge, reclassification, or	r cancellation of issued shares,
(if not applicable, indicate N/A)	different if not comained	in the amendment itself:
/A		

The date of each amendment(s) ac	loption;	, if other than t
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement 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/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated_08/16	6/2013	
Signature	tet	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	ARISSAIDIS RAMOS	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	_