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C. LEWIS NOV 1 2013 **EXAMINER**

COVER LETTER

TO: Amendment Section

Division of Corporations Secure Service Group, Inc. NAME OF CORPORATION: DOCUMENT NUMBER: _ n/a The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Chaswon Blackmon Name of Contact Person Secure Service Group, Inc. Firm/ Company 3602 N. Orange Blossom Trail Address Zellwood, Florida 32798 City/ State and Zip Code chaswonb@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (352) 217-6555

Area Code & Daytime Telephone Number Chaswon Blackmon Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

APPROVED AND FILED

Articles of Amendment to Articles of Incorporation of

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SECRETARY OF STATE
TALLAHASSEE, FLORID:

Secure Service Group, Inc.	S.M. OBCE, FERRING	
(Name of Corporation as currently filed with the	Florida Dept. of State)	
N/A P13000010	6825	
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendmen	
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporate" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	3602 N. Orange Blossom Trail	
(Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Zellwood, Florida	
	32798	
	P.O. Box 246 Zellwood, Florida	
	32798	
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addre		
Name of New Registered Agent		
(Florida s	street address)	
New Registered Office Address: (Cit	, Florida (Zip Code)	

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>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u></u>	Nidia Rock	2626 falcon Drive
Add			Apopka, Florida
Remove			32703
2) Change		_	
Add			
Remove			
3) Change			_
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s (Be specific)			
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an amendment provides for an exch	ange, reclassificatio	n, or cancellation	of issued shares,	
provisions for implementing the amer	idment if not conta	ined in the amendr	nent itself:	
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

APPRUYED AND FILED

The date of each amendment(s) adoption: date this document was signed. 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 sharcholders. 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 (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_10/24/2013 Signature (By a director, president of 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)