P1300032594

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CHAISION OF CORPORATION

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T. BROWN

COVER LETTER

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TO: Amendment Section
Division of Corporations

	RATION: AESPRIS		TY SER	VICES, INC.		
DOCUMENT NUMBER: P13000032594						
	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corre	spondence concerning this ma	tter to the follo	owing:			
	WILLIAM RANKI	N				
		Name of C	ontact Person	l		
	AESPRIS SECURITY SERVICES, INC.					
Firm/ Company 128 SE 11TH STREET						
	Address					
	DEERFIELD BEACH, FL 33431					
		City/ State	and Zip Code	•		
info	@aesprissecurity	.co				
	E-mail address: (to be us	sed for future	annual report	notification)		
For further information concerning this matter, please call:						
WILLIAM RA	NKIN	at	₍ 305	395-3304		
Name	of Contact Person	<u></u> <u></u>		de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:						
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fi Certified (Addition enclosed)	Copy al copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment Articles of Incorporation



AESPRIS SECURITY SERVICES, INC.

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

nent(s) to

P13000032594				
(Document Number of Co	rporation (if kn	own)		-
Pursuant to the provisions of section 607.1006, Florida Strits Articles of Incorporation:	atutes, this Flo	rida Profit Corpe	pration adopts the following	ig amendn
A. If amending name, enter the new name of the corpo	oration:			
		•		The ne
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb	"Inc," or "Co"	". A professiona	"incorporated" or the a l corporation name must	bbreviatio
B. Enter new principal office address, if applicable:	_			_
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>:SS</u>)			_
	-			-
	-		<u> </u>	-
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	-			-
	-			_
D. If amount in the control of the c				_
 If amending the registered agent and/or registered new registered agent and/or the new registered offi 		in Florida, ente	r the name of the	
Name of New Registered Agent				
Nume of New Regissered Agent	1. * *	·		
	(Florida street i	address)	· · · · · · · · · · · · · · · · · · ·	
	() Ior and sires (and cour		
New Registered Office Address:	(City)	 	, Florida(Zip Code)	_
	. •		•	
New Registered Agent's Signature, if changing Registe			blingtions of the mosition	
I hereby accept the appointment as registered agent. I a	m jamutar with	апи ассері іпе б	vingations of the position.	
St	D:-4			

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.

X Change	<u>PT</u>	John Doe	
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>	Address
1) Change			128 SE 11TH STREET
Add			
Remove			
2) Change	D	JOSE MORALES	380 W. PALMETTO PARK ROAD, #313C
Add			BOCA RATON, FL 33432
X			
3) Change	D	BARRY SILVERMAN	220 SEVILLE J
Add			DELRAY BEACH, FL 33446
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			** *** *** *** *** *** *** ***
Remove			
6) Change			
Add			
Remove			

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)
	W 20
an amendment provides for an exchorovisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an angle in the amendment itself:
·	

The date of each amendment(s) adoption:	, if other than the
· · · · · · · · · · · · · · · · · · ·	
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)	
(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.	
July 11, 2013	
Signature Willi Lank	
(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)	
WILLIAM RANKIN	
(Typed or printed name of person signing)	_
PRESIDENT & TREASURER	

(Title of person signing)