P 13000043577

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer; Malcom Kiddlell Auth The Adiption 8/15/17			

Office Use Only

563-4135



300301110223

07/10/17--01012--006 ++35.00



Manuchs

AUG 15 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: SYSTEMA-BERKOOT GROUP, INC. DOCUMENT NUMBER: P13000043577 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALEX POPESKOU Name of Contact Person BERKOOT INTERNATIONAL PROTECTION AGENCY, INC. Firm/ Company 2063 MAIN STREET SUITE 107 Address SARASOTA, FL 34237 City/ State and Zip Code opcenter300@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (941) 321-5000

Area Code & Daytime Telephone Number Malcolm Riddell, esq. 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 Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314



July 12, 2017

ALEX POPESKOU 2063 MAIN STREET SUITE 107 SARASOTA, FL 34237

SUBJECT: BERKOOT TRAINING CENTER, INC.

Ref. Number: P13000043577

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 717A00014070

Claretha Golden Regulatory Specialist II

www.sunbiz.org

Division of Communities D.O. DOV (2007 W.H.) Dl. 11, 0001

Articles of Amendment

	10
	Articles of Incorporati
	of
SYSTEMA-BERKOOT GROUP, INC.	
	(Name of Corporation as currently filed w
P13000043577	
	

(Mailing address MAY BE A POST OFFICE BOX)	The new neorporated or the abbreviation the
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation: A. If amending name, enter the new name of the corporation: BERKOOT TRAINING CENTER, INC. name must be distinguishable and contain the word "corporation," "company," or "i "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional cword "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	The new neorporated or the abbreviation the sorporation name must contain the
A. If amending name, enter the new name of the corporation: BERKOOT TRAINING CENTER, INC. name must be distinguishable and contain the word "corporation," "company," or "i "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional eword "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	The new incorporated or the abbreviation corporation name must contain the
BERKOOT TRAINING CENTER, INC. name must be distinguishable and contain the word "corporation," "company," or "i "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional coword "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ncorporated" or the abbreviation for poration name mixt control the
name must be distinguishable and contain the word "corporation," "company," or "i "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional cword "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ncorporated" or the abbreviation for poration name mixt contribute the
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional cword "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ncorporated" or the abbreviation for poration name mixt control the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	AUG 15 AM 00: 2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A	7 A C
(Mailing address MAY BE A POST OFFICE BOX)	## R
(Mailing address MAY BE A POST OFFICE BOX)	\$55 105
	
D. If amending the registered agent and/or registered office address in Florida, enter the	ne name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent N/A	
(Florida strevt address)	
N/A New Registered Office Address:	, Florida
(City)	(Zip Code)

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 = ChiefExecutive 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 Doc, 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>	<u>Addres</u> s
1) Change	N/A	N/A	N/A
Add			
Remove			
2) Change			
Ad d			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		—— ——	
Remove			

***). (Be specific)
i/A	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nendment is not contained in the amendment user.
,	
A	
A	
'A	
A	
A	
'A	
'A	
/A	
/A	
/A	
/A	

The date of each amendment(s) ad	option:	if other than the
date this document was signed.		
Effective date if applicable:		o more than 90 days after amendment file date)
	(no	o more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the Dep		neet the applicable statutory filing requirements, this date will not be listed as the e's records.
Adoption of Amendment(s)	(<u>CHECK</u>	K ONE)
☐ The amendment(s) was/were ado by the shareholders was/were sur	oted by the sharel ficient for approv	eholders. The number of votes cast for the amendment(s) oval.
☐ The amendment(s) was/were app must be separately provided for	oved by the share each voting group	reholders through voting groups. The following statement up entitled to vote separately on the amendment(s):
"The number of votes east	or the amendmer	ent(s) was/were sufficient for approval
by		group)
	(voting gr	group)
☐ The amendment(s) was/were ado action was not required.	oted by the board	d of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	nted by the incorp	rporators without shareholder action and shareholder
JULY 7, 20 Dated	17	
selected	rector, president (t or other officer – if directors or officers have not been rator – if in the hands of a receiver, trustee, or other court
	Alex Popeskou	Alex Popeskou
	(Type	ed or printed name of person signing)
	President	Harris 1
		(Title of person signing)