P13000050344

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Black Knigh	nt firearms Trainir	ng and Sales Inc.					
DOCUMENT NUMBI	D1200005024							
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.						
Please return all corresp	ondence concerning this mat	tter to the following:						
Mark Barcia								
		Name of Contact Person	•					
	Black Knight Fir	rearms Training	and Sales Inc.					
	-	Firm/ Company						
_	1121 W. PRICE E	BLVD #147						
		Address						
_	NORTH PORT, I							
		City/ State and Zip Code						
BKF	TS1@gmail.com	1						
		sed for future annual report	notification)					
For further information	concerning this matter, pleas	se call:						
Mark Barcia		_{at (} 941	421-5291					
Name of	f Contact Person		de & Daytime Telephone Number					
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)					
<u>Maili</u>	ng Address	Street	Address					
Amer	idment Section	Amendment Section						
	ion of Corporations	Division of Corporations						
	Box 6327	Clifton Building						
i aitai	hassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301						

Articles of Amendment to Articles of Incorporation of

Black Knight firearms Training and Sales Inc
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(Name of Corporation as currently filed with the Florida Dept. of State)		0	· 177	
P13000050344		<u></u>	O P	
(Document Number of Corporation (if known)	Annua, u. a	့ ဆို	**	

endment(s) to

A. If amending name, enter the new name of the corporation:	į			
name must be distinguishable and contain the word "corporo "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." o word "chartered," "professional association," or the abbreviatio	or "Co". A professional corporation name must on "P.A."			
B. Enter new principal office address, if applicable:	4994 Trott Cir, Unit 28			
Principal office address <u>MUST BE A STREET ADDRESS</u>)	North Port, FL. 34287			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1121 W. PRICE BLVD #147			
	NORTH PORT, FL 34288			
D. If amending the registered agent and/or registered office a	address in Florida, enter the name of the			
new registered agent and/or the new registered office add				
new registered agent and/or the new registered office add	ress:			
Name of New Registered Agent Mark Barcia				
Name of New Registered Agent Agent Mark Barcia 1121 W. PRIC	CE BLVD #147 a street address)			
Name of New Registered Agent New Registered Office Address: Name of New Registered Agent	CE BLVD #147			

Page 1 of 4

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 <math>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 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	Р	MATTHEW M. UEBELACKE	2200 MAURITANIA RD
Add			PUNTA GORDA, FL 33983
Remove			
2) Change	Р	Jorge C. Garcia	1121 W. PRICE BLVD #14
Add			North Port, FL. 34288
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Allach <i>a</i>	<mark>ding or add</mark> additional sh	neets, if nee	cessary).	(Be specij	fic)				
									
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provisi	nendment p ions for imp not applica	<u>plementing</u>	the ame	ange, recla	assification not contai	n, or cance ned in the	llation of amendme	issued sha nt itself:	res,

			-						
	<u> </u>								

Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment 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. "The number of votes cast for the amendment(s) was/were sufficient for approval by	_, it other than th
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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 7/4/2014 Signature (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)	
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selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Mark Barcia	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_