P1300064185

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
Special Instructions to	rining Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: BLUE EDGE SECURITY SYSTEMS, CLAS
DOCUMENT NUMBER: P13000064185
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Chris FARAH
Name of Contact Person
BULE EDGE SECURITY SYSTEMS
10560 ABILENE RO
Address
Tax, FL 37218 City/ State and Zip Code
Chrisa BLUEEDGES ECULITY. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chris Farah at (904) 571-3093, Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles	of	Incorpo	ratior
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\	Articles of Incorporation		
Blue Flor Servito	direction and a	46-	
(Name of Corporation as currently f	iled with the Florida Dept. o	(State)	
P13000064185			
(Document Number of	f Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit	Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the c	orporation:		
			The new
name must be distinguishable and contain the wo. "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o," "Inc," or "Co". A profe	," or "incorporated" o ssional corporation nan	or the abbreviation ne must contain the
B. Enter new principal office address, if applicable	<u></u>		
(Principal office address <u>MUST BE A STREET AD</u>			
			<u> </u>
			S S
C. Enter new mailing address, if applicable:	280		A E
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>		
		· · · · · · · · · · · · · · · · · · ·	N N
			<u>. 5</u>
D. If amending the registered agent and/or registe	red office address in Florida	enter the name of the	
new registered agent and/or the new registered		denter the hame of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)		Code)
New Registered Agent's Signature, if changing Registered	gictored Agent:		
I hereby accept the appointment as registered agent.		t the obligations of the p	osition.
Signature of N	ew Registered Agent, if chang	ing	

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> <u>J</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	1	Low Grasse	12465 chy woods Ct Jachsonville, FL 32258
Add			Hochomyelle, FL 32258
Remove		Timothy Karst for.	
2) Change	D	Timothy Karst fr.	5950 Dunn Avenue Jorhsonvilla, FL 32218
_X Add			Joeksonulla, FL 52218
Remove			
3)Change			
Add			
Remove			
4)Change			
Add			
Remove			·
5) Change			
Add			
Remove			
6) Change		4-4-4-4	
Add			
Remove			

E. If amending or additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
,

The date of each amendment(s) adoption:	, if other than the
0/2-12	
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)	
☐ 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 6 20 13	
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)	
CHRIS FARAH	
(Typed or printed/name of person signing)	_
White DRESTDENT	Γ
(Title of person signing)	_

(Title of person signing)