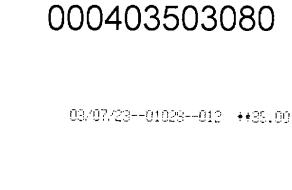
P13000053378

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(Requestors Name)			
(Address)			
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(City/State/Zip/Phone #)			
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COVER LETTER

TO: Amendment Section Division of Corporations

,

NAME OF CORPO	DRATION: DENSON PROTE	ECTIVE SERVICES, COR	P	
DOCUMENT NUM	D12000002279			
The enclosed Article	s of Amendment and fee are su	abmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	JEAN D. SANON			
		Name of Contact Person	n ·	
	DENSON PROTECTIVE SERVICES, CORP			
		Firm/ Company		
	20451 NW 2ND AVE SUITE 208			
	Address			
	MIAMI, FLORIDA 33169			
		City/ State and Zip Cod	C	
	JEAN@DENSONPROTECT	ΓΙVE.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:		
JEAN D. SANON		786 at (_	486-5178	
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

51	,	
2023 MAR - 7	ED	Đ,
SEC	AM.	

DENSON PROTECTIVE SERVICES, CORP

(Name of Companyion	as currently filed with the Florida Dept. of States 17
P13000082378	as currently med with the Piorida Dept. or state.
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
	The new
name must be distinguishable and contain the word "corp "Inc" or Co" or the designation "Corp," "Inc." o "chartered." "professional association," or the abbrevia	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word ution "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
·	
	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	ered Agent
	om familiar with and accept the obligations of the position.
Signatu	re at New Registered Agent if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Add

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> John Doe X Remove \underline{V} Mike Jones X Add<u>SV</u> Sally Smith Type of Action <u>Title</u> Name Address (Check One) VP SANON, MARGARETTE 20451 NW 2ND AVE 208 1) ____ Change MIAMI, FL 33169 ___ Add X__Remove 2) ____ Change ___ Add __ Remove 3) ____ Change ____ Add ____ Remove 4) ____ Change ____ Add __ Remove 5) Change Add ____ Remove 6) ____ Change

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
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If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
, ,,	
	

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The date of each amendment		, if other than the
date this document was signed	02/15/2023	
Effective date if applicable:	(no more than 90 days after amendment file o	date)
	his block does not meet the applicable statutory filing requires the Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/well action was not required.	re adopted by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the ere sufficient for approval.	e amendment(s)
	re approved by the shareholders through voting groups. The foliod for each voting group entitled to vote separately on the amend	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
02/15/ Dated	2023	
Datett		
Signature		
ZÍÍ.	y a director, president or other officer – if directors or officers h lected, by an incorporator – if in the hands of a receiver, trustee	ave not been
	pointed fiduciary by that fiduciary)	, or other court
	JEAN D. SANON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	