P13000083479

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D OF STATE RPORATIONS

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Amend (10, 12, 10, 13)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Dome Security Inc						
DOCUMENT NUMBER: P13000083679						
The enclosed Articles of Amendment and	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:						
David Carp	enter					
<u></u>	Name of Contact Person					
Dome Secu	ırity Inc					
	Firm/ Company					
1572 N Me	adowcrest Blvd					
Address						
Crystal Rive	er, FL 34429					
	City/ State and Zip Code					
aaalockm@gm	ail.com					
E-mail address	: (to be used for future annual report notification)					
For further information concerning this matter, please call:						
Paul Schmieder	_{at (} 352 ₎ 795-9009					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amo	ant made payable to the Florida Department of State:					
■ \$35 Filing Fee □\$43.75 Filin Certificate o						
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					

Articles of Amendment to Articles of Incorporation of

Dome Security Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P13000083679	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amerits Articles of Incorporation:	ndment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbrevia "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	ation n the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	.:5
<u></u> 	1 82
	引題.
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	SECULATION CONTROLLING
new registered agent and/or the new registered office address:	SE S
Name of New Registered Agent	主影
(Florida street address)	= 0
	* 1
New Registered Office Address:, Florida	
(Cuy) (Zip Coue)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
t nevery accept the appointment as registered agent. I am jamiliar with ana accept the obligations of the position.	
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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Glen Carpenter	9600 W Pimpernel Lane
Add			
Remove			Crystal River, FL 34429
2) Change	CFO	Paul Schmieder	9005 N Golfview Drive
✓ Add			
Remove			Citrus Springs, FL 34434
3) Change			
Add			
Remove			
4) Change	·		
Add			
Remove			
5) Change			
Add	·		
Remove			*****
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) he (Be specific)	<u>re</u> :	
		The second secon	
			<u> </u>
		·	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, endment if not containe	or cancellation of issu d in the amendment it	<u>ed shares,</u> self:

date this document was signed.	1011:	_, if other than the
Effective date if applicable:		
Zitotive date <u>in applicable</u> .	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for t	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated 11/19/13		
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)	_
Da	vid Carpenter	
	(Typed or printed name of person signing)	_
· CE		_
	(Title of person signing)	