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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: MASTER INVES	STIGATIONS :	SECURITY	& ALARMS, INC		
DOCUMENT N	UMBER: P14000039582					
The enclosed Arti	cles of Amendment and fee are su	bmitted for fili	ng.			
Please return all c	orrespondence concerning this ma	tter to the follo	wing:			
	ANTONIO GONZALEZ					
		Name of Co	ontact Perso	n		
	GONZALEZ & ASSOCIAT	ES III PA				
		Firm/ (Company			
	1820 N CORPORATE LAKES BLVD SUITE 204					
	•	Ad	dress			
	WESTON, FL 33326					
		City/ State	and Zip Cod	e		
	AGONZALEZ@AMEFINA!	NCIALGROUI	P.COM			
_	E-mail address: (to be us			notification)		
For further inform	ation concerning this matter, pleas	se call:				
ANTONIO GON	ZALEZ	ar (954	773-7286		
Na			de & Daytime Telephone Number			
Enclosed is a chec	k for the following amount made	payable to the	Florida Depa	artment of State:		
S35 Filing Fee	e □\$43.75 Filing Fee & Certificate of Status	S43.75 Fil Certified ((Additional enclosed)	Copy I copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle					

Tallahassee, Fl. 32301

Articles of Amendment

to

Articles of Incorporation

of

MASTER INVESTIGATIONS SECURITY & ALARMS, INC

(Name)	of Corporation as currer	tly filed with the Florida D	ept. of State)
	P14000	039582	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc." or	"Co". A professional corp	rporated" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	
		-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)		N/A	N 28
			P S S S S S S S S S S S S S S S S S S S
D. If amending the registered agent an new registered agent and/or the new			name of the
Name of New Registered Agent GONZALEZ & A		IATES III PA	
	1820 N CORPORATE I	LAKES BLVD	
	tFlorida :	street address)	
New Registered Office Address:	WESTON		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ions of the position.
	1/4)		
	Signatufe of New	Rehistered Agent, if changin	g

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.

Example: X Change	PT	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>	Address
1) Change		NA	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3) Change		N/A	 ***************************************
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach a	ding or addin idditional shee	ets, if necessary,)			
N/A							

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if an an	andment nra	videc for an ex	changa racinssi	fication or can	ncellation of issu	ad charac	
provisi	ons for imple	menting the an	nendment if not	contained in th	<u>te amendment it</u>	self:	
_	not applicable	, indicate N/A)					
N/A							
						-	
							-

The date of each amendment(s) adoption:	, if other than the
-	
Effective date if applicable: (no more than 90 days after amenda	nent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes ca by the shareholders was/were sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on to	
"The number of votes east for the amendment(s) was/were sufficient for appr	oval
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	on and shareholder
Dated	. 1
Signature (By a director, president or other officer – if directors or of selected, by an incorporator – if in the hands of a regeiver appointed fiduciary by that fiduciary)	
MICHELLE B. RODRIGUEZ	
(Typed or printed name of person sign	ing)
PRESIDENT	
(Title of person signing)	

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