

P14 000057860

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2023 AUG 15 AM 11:46

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CRUZ Secure Inc.
DOCUMENT NUMBER: P14000057860

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christina Jackson
Name of Contact Person
CRUZ Secure Inc.
Firm/ Company
8581 NW 57th DR.
Address
Coral Springs, FL 33067
City/ State and Zip Code
CRUZCV77
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christina Jackson at (954) 2487320
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 ☐ \$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)

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

FILED

2023 AUG 15 AM 11:46

Cruz Secure Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P14000057860

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

N/A

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

CHRISTINA C. JACKSON

8581 NW 57th DR.

(Florida street address)

New Registered Office Address:

Coral Springs

(City)

, Florida

33067

(Zip Code)

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.

Christina Jackson

Signature of New Registered Agent, if changing

Check if applicable

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	P	Christma C. Jackson	8581 NW 57 th DR Coral Springs FL. 33067
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

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)

N/A

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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)

Dated _____

Signature _____

Christina Jackson
(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)

Christina Jackson
(Typed or printed name of person signing)

President
(Title of person signing)

Harvey Ruvin
Clerk of the Circuit and County Courts
Miami-Dade County, Florida



Application 2021-009150

Official Record

Date DEC-01-2021

Rec# 347521

Marriage License Bureau
601 Nw 1st Court R1900
Miami FL 33136
Phone: (305) 275-1155

Certificate of Marriage

I, Harvey Ruvin, Clerk of the Circuit and County Courts of Miami-Dade County, State of Florida, do hereby certify that:

BRYANT MAURICE JACKSON

Resident of the City of CORAL SPRINGS County of BROWARD
State or Foreign Country of FLORIDA, and who was born on FEB-11-1974
in the State or Foreign Country of CALIFORNIA and

CHRISTINA VALERIE CRUZ

Resident of the City of CORAL SPRINGS County of BROWARD
State or Foreign Country of FLORIDA, and who was born on FEB-14-1977
in the State or Foreign Country of FLORIDA

were married on NOV-21-2021 in DAVIE, FL
by MICHAEL J. CALDERIN, who is a CLERGY

WITNESS my hand and Official Seal this 24 day of January, 2022

Harvey Ruvin, Clerk
Circuit and County Courts

Mike Calderin

306636

By: _____
Deputy Clerk

ALLIANCE

