Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210003672123)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

: (305)552-5973

Fax Number

: (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN **EMPIRE SOUND & PROTECTION INC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

## Articles of Amendment to Articles of Incorporation

EMPIRE SOUND & PROTECTION INC	c	·-		
<u>(Name o</u> P14000057970	of Corporation as curren	tly filed with the Florida Dept.	of State)	
	(Domment Number	-6C		
		of Corporation (if known)	: •	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation ad	opts the following amends	ent(s) to
A. If amending name, enter the new n	ame of the corporation;		. •	
			·	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	.orp." "Inc." or "Co".	A professional cornoration no	The ne print the abbreviation "Corp., one must contain the wor	ਲ *- ਬੰ
B. Enter new principal office address.	if applicable:	24420 S. DDXIE HWY		
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)		BAY Q5		
		PRINCETON, FL 33032		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		BAY G5		
		PRINCETON, FL 33032		
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	nd/or registered office ad w registered office addre	dress in Florida, enter the nam ss:	ie of the	
	24420 S. DIXIE HWY B	AY G5		
	(Florida s	street address)		
New Registered Office Address:	PRINCETON		Florida 33032	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c	tered agent. I am familiai	at; r with and accept the obligations Registered Agent, if changing	NSSEE FU	•
Check if applicable			1AIC ORIDA	-
☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11	) (e), F.S.		1

if amending the Officers and/or Directors, enter the sitte and any and a second and
If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and
(Attach additional sheats if personan)

(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.

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 Doc				
X Remove	<u>v</u>	Mike Jones				
X Add	\$¥	Sally Smith			•	
Type of Action (Check One)	Title	Name		Address	,	
1)Change			·	:		
Add	•			<del>- "</del>		<del>-</del>
Remove						
2) Change						
Add			;;			
Remove 3) Change	<b></b>	·				
Add						
Remove						
4) Change		<del>-</del>				
Add				-		
Remove						
5) Change		<del></del>				
Add						
Remove					. <del></del>	
6) Change	<del></del>	<u> </u>				
Add				<u> </u>		
Remove					···-	

			Be spec						
					<u>-</u>				
		·						-	
<del>_</del>		<del>-</del>	<u> </u>	· .	•			•	en in the second
					<u>.</u>				· · · · · · · · · · · · · · · · · · ·
								<del></del>	
	· _								<u> </u>
			<del></del> -	<del>.</del>					
<del></del>			<del></del>			·	·		•
······································						·		<del>-</del>	:
								<del></del> _	
		•		<del></del>					
<del></del> -		·	·	-		<del></del>			
	<del></del>								
		<u> </u>						<u>.</u>	
··- <u></u> -		<del></del>							
<del>**</del>									
<del></del> <u></u> -		· ·							
an amendm	ent provides	for an exch	ange, rech	assificatio	D Ares	saallasta	l lann ad		
	ent provides		ange, rech	essificatio not contai	n, or can ned in t	ecellation of	issued ent itse	shares,	
	ent provides r implement plicable, indic		ange, rech	assificatio not contai	n, or cu ned in t	icellation o be amendm	(issued ent itse	shares, C	
			ange, rech	assificatio not contai	n, or ear	eccilation o	issued ent itse	shares, C	
			ange, rech adment if	essificatio not contai	p. or can ned in t	ecellation o	issued ent itse	ghares,	
			ange, rech adment if	assificatio not contai	n or ca	ecellation o	(issued ent itse	shares,	
			ange, rech adment if	essificatio not contel	n, or can	xcellation o he amendm	(Issued	ghares, C	
			ange, rech	assificatio not contai	n, or can	ecellation o	(issued	ghares,	
			ange, rech	assificatio not contai	n, or can	ecellation o	(Isaped	ahares,	
			ange, recli	essification	n or can	ecellation o	(Isaped ent itse	ghares, C	
			ange, rech	assification	p, or can	icellation o	(Issued	ghgres,	
			ange, rech	assificatio not contai	n, or can	ecellation o	(Isaped ent itse	ghares,	
			ange, recla	essification	p, or can ned in t	ecellation o	(Isaped ent itse	ghares, C	

The date of each amendment(s) at date this document was signed.	option;		, if other than th
Effective date if applicable:	·		
-	(no more than 90 days	after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	noti daga mit annu titi i i i i i i i i i i i i i i i i i	statutory filing requirements, this date will	not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	: •	
The amendment(s) was/were adop action was not required.	oted by the incorporators, or board of	of directors without shareholder action and	shareholder
Tribe and the second of the se			
by the shareholders was/were suf	ted by the shareholders. The numb ficient for approval.	per of votes cast for the amendment(s)	
The amendment(s) was/were appromist be separately provided for e	oved by the shareholders through watch voting group entitled to vote se	oting groups. The following statement parately on the amendment(s).	;
"The number of votes cast for	or the amendment(s) was/were suffi	icient for approval	
by OMARI DUNCAN		P. C.	
oy	(voting group)	"	
09/30/2021 Dated			·
(By a dire selected,	ctor; president or other officer - if by an incorporator - if in the hands I fiduciary by that fiduciary)	directors or officers have not been of a receiver, trustee, or other court	<del>_</del>
o -	MAR I DUNCAN		
	(Typed or printed name of	f person signing)	<del></del>
	THE PARTY OF THE P	<u> </u>	
	(Title of person signing)	-	<del></del>