

P15000049838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

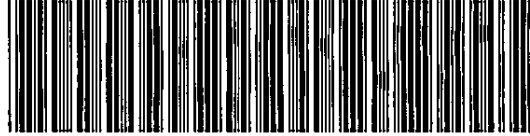
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Jeff Cirminiello  
called & gave permission  
to add the new name  
after checking  
for a name that  
was available.

Office Use Only



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07/06/16--01004--006 \*\*35.00

RECEIVED  
FILING OFFICE  
SEP 09 2016

16 SEP -9 AM 9:56

N/C  
Amend.

SEP 09 2016

D CONNELL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 30, 2016

JEFF CIRMINIELLO  
1293 N. UNIVERSITY DRIVE #235  
CORAL SPRINGS, FL 33071

SUBJECT: CRASH RESPONSE TEAM, INC.  
Ref. Number: P15000049838

We have received your document for CRASH RESPONSE TEAM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair  
Regulatory Specialist II

Letter Number: 716A00018457

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Crash Response Team, Inc.

DOCUMENT NUMBER: P15000049838

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

Please return all correspondence concerning this matter to the following:

Jeff Cirminiello

Name of Contact Person

Magnus, Inc. Corp.

Firm/ Company

1293 N. University Drive #235

Address

Coral Springs, Florida 33071

City/ State and Zip Code

jeff@getmagnus.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeff Cirminiello

at ( 954 )

529-0647

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

Crash Response Team, Inc.

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

P15000049838

(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:**

MAGNUS INTERNATIONAL INC.

*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**)*

1293 N. University Drive #235

Coral Springs, Florida 33071

**C. Enter new mailing address, if applicable:**

*(Mailing address **MAY BE A POST OFFICE BOX**)*

1293 N. University Drive #235

Coral Springs, Florida 33071

**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

Jeff Cirminiello

1293 N. University Drive #235

*(Florida street address)*

New Registered Office Address:

Coral Springs

*(City)*

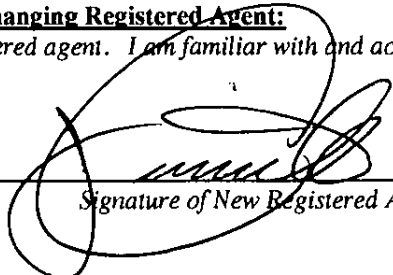
Florida

33071

*(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.*

  
*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.

Example:

☒ Change      PT      John Doe

☒ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P</u>	<u>Spero Georgedakis</u>	<u>284 Woodstork Point</u>
<input type="checkbox"/> Add			<u>Jupiter, Florida</u>
<input checked="" type="checkbox"/> Remove			<u>33458</u>
2) <input type="checkbox"/> Change	<u>P</u>	<u>Jeffrey Cirminiello</u>	<u>9810 NW 20 Street</u>
<input checked="" type="checkbox"/> Add			<u>Coral Springs, Florida 33071</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>VP</u>	<u>Jerry Cirminiello</u>	<u>9810 NW 20 Street</u>
<input type="checkbox"/> Add			<u>Coral Springs, Florida 33071</u>
<input checked="" 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)*

Spero Georgedakis is no longer a part of the corporation.

Jeffrey Cirminiello is now the President

Steve Cady will remain the Vice President

Jerry Cirminiello is being removed. This was just an error when filed. This name was supposed to be Jeffrey Cirminiello.

The company name is now going to be MAGNUS INTERNATIONAL INC. We no longer want the name CRASH RESPONSE TEAM, INC.

The new business and mailing address have been changed to 1293 N. University Drive, Coral Springs, Fl 33071.

The Tickin Law Group and their address have been removed as registered name and address

**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)*

The date of each amendment(s) adoption: July 1 2016, if other than the date this document was signed.

Effective date if applicable: July 18 2016  
(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 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)

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

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated July 1 2016

Signature \_\_\_\_\_

(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)

JEFFREY C. GEMELLI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)