P15000058155

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SECRETARY OF STATE
TALLAHASSEE, FL

FILED
2024 DEC -3 4M II: 46

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	SECUREMAX SO	LUTIONS. INC		
DOCUMENT NUM	P15000058155			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all com	espondence concerning this ma	tter to the following:		
	ORTEGA, LIUVER			
		Firm/ Company		
	1580 West 38 Place Unit 10	0		
		Address	-	
	Hialcah, FL 33012			
City/ State and Zip Code				
	lortega@secmax.org			
	E-mail address: (to be us	sed for future annual report	notification)	202 SE
For further informat	ion concerning this matter, pleas	se call:		TALLAHASSEE, FL
Liuver Ortega		305 at (907-4426	一 表示 し
Nam	e of Contact Person		de & Daytime Telephone Number	T SAGE A P
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	11: 46 STAT
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	m
Mailing Address		Street	Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

The second secon

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	y filed with the Florida Dept. of State)
P15000058155	
(Document Number of	Corporation (if known)
cursuant to the provisions of section 607.1006, Florida Statutes, this Ass. Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
_	The new
ame must be distinguishable and contain the word "corporation," "c 'Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A 'chartered," "professional association," or the abbreviation "P.A."	I professional corporation name must contain the word
3. Enter new principal office address, if applicable:	1580 West 38 Place Unit 10
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Hialeah, Fl 33012
	
Enter new mailing address, if applicable:	1580 West 38 Place Unit 10
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Hialcah, FL 33012
	ress in Florida, enter the name of the
D. If amending the registered agent and/or registered office addr	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	AHAD AHAD
Name of New Registered Agent	
	<i>∽</i> ∽ ∽ ∽ ∽ ∽ ∽ ∽ ∽ ∽ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	_
	reet address)
New Registered Office Address: 1580 West 38 Place Unit 1	

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

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	CEO		ORTEGA, LIUVER	1580 West 38 Place Unit 10
X Add		_		HIALEAH,FL 33012
Remove				
2) Change	Directo	or —	DEL TORO, MACDIEL	1580 West 38 Place Unit 10
X Add				Hialeah, FL 33012
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				SEOF
Remove				
5) Change		_		15. Common
Add				ASSER
Remove				o mi
6) Change		_		
Add				

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1. The state of th

Remove

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

Effective date if applicable:	(no more than 90 days after amendment file date)			
Note: If the date inserted in this be document's effective date on the De	slock does not meet the applicable statutory filing requirements, this date we partment of State's records.	ill not be liste	ed as the	e
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action as	nd shareholde	г	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.			
must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval			
by	(voting group)	S	2:	
11/22/202- Dated	hrector, president or other officer – if directors or officers have not been	ECRETARY OF ST TALLAHASSEE,	2024 DEC -3 AMI	
selecte	cd, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary) Livel ORtegA (Typed or printed name of person signing)	STATE E. FL	Ah II: 46	