## P15000070989

(Re	equestor's Name)	
(Ad	dress)	<u> </u>
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 24, 2015

RAFAEL GARCES BLACKRAIN SECURITY AGENCY INC 21352 SW 112 AVE., BLDG. 1 APT. 302 CUTLER BAY, FL 33189

SUBJECT: BLACKRAIN SECURITY AGENCY INC

Ref. Number: P15000070989

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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

Cheryl R McNair Regulatory Specialist II

Letter Number: 115A00024809



## COVER LETTER

, The state of the
TO: Amendment Section Division of Corporations
NAME OF CORPORATION: BLACKFAIN SOCURITY AGENCY DOCUMENT NUMBER: P150000 7589.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rafael GARGES
Blackigin Socurity Agency Inc.
21352 SW 112 AVE bldg 1 spt302
Cutter Bay 23189.
City/ State and Zip Code  Black/GinSecuritagency & Gmbi Com.  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rafael Garres = 786, 398 1930
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:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  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

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DACKIGIN S	ecurity	AGENCY IF	<u> </u>	The A P
(Name of Cor	poration as current	av nied with the Florid	la Dept. of State	0
2 IS	000070	0989		The Co
(	Document Number of	of Corporation (if knows	1)	
ursuant to the provisions of section 607.1006,	Florida Statutes, this	Florida Profit Corpore	ation adopts the f	ollowing amendment
Articles of Incorporation:	·	,	,	<u> </u>
. If amending name, enter the new name of	the corporation:			
ame must be distinguishable and contain th		N/12		
ame must he distinguishable and contain th	ne word "corporation	n " "company " or "	incornorated" or	The new
Corp.," "Inc.," or Co.," or the designation	"Corp," "Inc," or '	"Co". A professional o	corporation name	must contain the
ord "chartered," "professional association,"	or the abbreviation	"P.A."		
. Enter new principal office address, if app		<del> </del>		·
Principal office address <u>MUST BE A STREE</u>	<u>r address</u> )	N /2	a	
			· · · · · · · · · · · · · · · · · · ·	<del></del>
. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFIC	CE BOX)	<del></del>		
		N/A		
	-	-		
If amending the registered agent and/or r			he name of the	
new registered agent and/or the new regis	tered office address	<u>s:</u>		
Name of New Registered Agent	·	N/A		<u></u>
		,		
<del></del>	(Florida sti	reet address)		
New Registered Office Address:			, Florida_	
		(City)	, riorida_	(Zip Code)
ew Registered Agent's Signature, if changin hereby accept the appointment as registered ag	g Registered Agent	i	antique of the no	cition
terety accept the appointment as registered as	çera. I anı jamınlar i	<i>wan ана ассерине ови</i>	ganons oj ine po. ,	SHIOT.
			///	
			41/0	
	Signature of New F	Registered Agent, if char		<del> </del>

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change		MARIND COYAND BAILLEY	21352 SW 112AVE bldg 1 Apt 302
Add			bldg 1 Apt 302
X Remove			
2) Change			
Add			
Remove		\ \ \	
3 ) Change			<del></del>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

Attach, additional sheets, if	necessary).	(Be specific)	•			
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f an amendment provides provisions for implement	ing the ame	ndment if not	contained in the	enation of issi	tself:	
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The date of each amendment(s) adoption	an:	X/A		if athor than th
date this document was signed.	JII		1 1	, if other than the
Effective date <u>if applicable</u> :	(no more than	N/A 90 daýs after amendi	mont file data)	
	(no more than	эн ааух анег атена	meni jile aale)	
Note: If the date inserted in this block document's effective date on the Departn	does not meet the appliant of State's records.	icable statutory filing	g requirements, this date wil	I not be listed as th
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. Th	ne number of votes ca	ast for the amendment(s)	
☐ The amendment(s) was/were approved must be separately provided for each	d by the shareholders the voting group entitled to	rough voting groups.  o vote separately on t	The following statement he amendment(s):	
"The number of votes cast for th	e amendment(s) was/we	ere sufficient for appi	roval	
by	N/0			
•	(voling group)			
The amendment(s) was/were adopted action was not required.	by the board of director	s without shareholde	r action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators wit	hout shareholder act	ion and shareholder	
Dated	17-15			
Signature				<del></del>
	r, president or other off			
	an incorporator – if in th duciary by that fiduciary		r, trustee, or other court	
appointed in		' i		
	KAT		ARCES	
	(Typed or printed	name of person sign	ning)	
	Pres	iaent.		
	(Title	of person signing)		