| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | dress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | : #) |
| PICK-UP | MAIT | MAIL MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | ļ |
| | | |
| | | |
| | | |

Office Use Only



300280803043

01/19/16--01010--003 **35.00

JAN 19 2016 R. While

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: BIDWELL INTER | RNATIONAL DETECTIVE AGENCIES INC. | | | | |
|--|--|--|--|--|--|
| DOCUMENT NUMBER: P15000098476 | | | | | |
| The enclosed Articles of Amendment and fee are su | bmitted for filing. | | | | |
| Please return all correspondence concerning this ma | tter to the following: | | | | |
| TIMOTHY BIDWELL | | | | | |
| | Name of Contact Person | | | | |
| BIDWELL INTERNATION | AL DETECTIVE AGENCIES INC | | | | |
| | Firm/ Company | | | | |
| 3514 216TH STREET | , , | | | | |
| | Address | | | | |
| LAKE CITY, FL 32024 | | | | | |
| | City/ State and Zip Code | | | | |
| SHILLEMSPECIALTIES@GMA1 | L.COM | | | | |
| | sed for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | | |
| TIMOTHY BIDWELL | at (386) 935-1029 | | | | |
| Name of Contact Person | Area Code & Daytime Telephone Number | | | | |
| Enclosed is a check for the following amount made p | payable to the Florida Department of State: | | | | |
| \$35 Filing Fee \$\text{Certificate of Status}\$ | □\$43.75 Filing Fee & □\$52.50 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

FILED 16 JAN 19 PH 10: 45

SECRETARY OF STATE

to

| BIDWELL INTERNATIONAL DETECTIVE AGE | | | ASSET FLORIDA |
|---|------------------------------|-------------------------|---|
| (Name of Corporat | ion as currently fi | iled with the Florida | Dept. of State) |
| (Docum | ment Number of Co | orporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation: | la Statutes, this <i>Flo</i> | rida Profit Corporati | on adopts the following amendmen |
| A. If amending name, enter the new name of the c | orporation: | | |
| BIDWELL INTERNATIONAL DETECTIVE AGEN | NCY INC. | | The new |
| ame must be distinguishable and contain the woi "Corp.," "Inc.," or Co.," or the designation "Corport" word "chartered," "professional association," or the | o, " "Inc," or "Co | ". A professional co | corporated" or the abbreviation rporation name must contain the |
| B. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u> | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO | DX) | | |
| | | | |
| If amending the registered agent and/or register new registered agent and/or the new registered | | in Florida, enter the | name of the |
| Name of New Registered Agent | | | |
| | (Florida street i | address) | |
| New Registered Office Address: | | | . Florida |
| New Negistered Office Address, | (Cit | לע | (Zip Code) |
| ew Registered Agent's Signature, if changing Reg | | | |
| hereby accept the appointment as registered agent. | 1 am familiar with | and accept the obliga | itions of the position. |
| | | | |
| Sign | ature of New Regis | stered Agent, if change | ing ——— |

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 <math>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) | Title | <u>Name</u> | Address | | | |
| 1) Change | P | TIMOTHY BIDWELL | 3514 216TH STREET | | | |
| Add _x Remove | | | LAKE CITY, FL 32024 | | | |
| 2) Change | P | TIMOTHY BIDWELL SR | 3514 216TH STREET | | | |
| X Add | | | LAKE CITY, FL 32024 | | | |
| Remove | | | | | | |
| 3) Change | <u></u> | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | **** | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| б) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |

| Attach additional she | ing additional A eets, if necessary) |). (Be specific |) | | | |
|-----------------------|---|------------------|---------------------|----------------------|---------------------------------------|--|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| ··· | | | | | | |
| | | <u></u> | | | | |
| | | | | | | |
| | | | | | | |
| | | | | <u> </u> | · <u> </u> | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| an amendment pr | ovides for an exc | change, reclassi | ification, or cance | ellation of issued s | hares. | |
| orovisions for impl | ementing the am | iendment if not | contained in the | amendment itself | <u>L</u> | |
| (if not applicabl | 'e, indicate N/A) | | | | | |
| | | | | | | |
| | <u> </u> | | | | | |
| | | | | _ | | |
| | | | | | | |
| · | | | | | | |
| | | | | | | |
| | | | | | | |
| | · | | | | | |
| | | | | · | | |

| | 01/04/16 | |
|--|---|----------------------|
| The date of each amendment(s) a date this document was signed. | doption: | _, if other than the |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the De | block does not meet the applicable statutory filing requirements, this date will repartment of State's records. | iot be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were add by the shareholders was/were st | opted by the shareholders. The number of votes east for the amendment(s) afficient for approval. | |
| | 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) | |
| · | (voting group) | |
| The amendment(s) was/were add action was not required. | opted by the board of directors without shareholder action and shareholder | |
| ☐ The amendment(s) was/were add action was not required. | opted by the incorporators without shareholder action and shareholder | |
| 01/04/16 Dated | | |
| Signatur | First m & Bluell 5 R | |
| selecte | irector, presid ent o r other officer — if directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) | |
| арропі | _ | |
| | TIMOTHY BIDWELL SR | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT Aut EBallse | |
| | (Title of person signing) | |