P16000010821

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Name Change

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D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Accurate Investiga	ations and Drug Screening,	Inc			
IXXUMENT NUM	P16000010821 BER:					
The enclosed Articles	s of Amendment and fee are su	ibmitted for filing.				
Please return all corre	espondence concerning this ma	itter to the following:				
	Wade Douty					
	<u> </u>	Name of Contact Person	1			
	Accurate Investigations and Drug Screening, Inc					
		Firm/ Company				
	4592 North University Drive	• •				
		Address				
	Lauderhill, Fl 33351					
		City/ State and Zip Code	e			
info(@accinvestigationsfl.com					
	*	sed for future annual report	notification)			
	,	•	,			
For further information	on concerning this matter, pleas	se call:				
Wade Douty		954 at (372-1103			
Name	of Contact Person		de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle			
	•		Tallahassee, FL 32301			

Articles of Amendment Articles of Incorporation of

•				
•	Articles of	f Amendment		1. W. C.
		to Incorporation		
		of		
ccurate Investigations and Drug Screein	g, Inc			6. 7
(Name o	Corporation as curre	ntly filed with the Florida	Dept. of State)	
6000010821				- -
	(Document Number	r of Corporation (if known)		
rsuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, th	nis Florida Profit Corporat	ion adopts the following ame	ndment(s) to
If amending name, enter the new na	me of the corporation:			
ccurate investigations and Security, Inc				пеш
Enter new principal office address, rincipal office address MUST BE A S		N/A		
Enter new mailing address, if appli (Mailing address MAY BE A POST of		N/A		<u> </u>
if amending the registered agent an new registered agent and/or the new	registered office addr		e name of the	
Name of New Registered Agent	N/A			
		street address)		
New Registered Office Address:	N/A	(City)	, Florida(Zip Code)	
ew Registered Agent's Signature, if c hereby accept the appointment as regist	ered agent. I am familio	ar with and accept the oblig		
	~// /	w Registered Agent, if chan	naine	

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	PT	John D	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Address</u>
1) Change		_		
Add				
Remove				
2)Change				
^dd				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add		_		
Remove				
				-
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				

(Attach additional sheets, if necessary).	
A	
	<u> </u>
	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	
cif not applicable, indicate N/A)	
cif not applicable, indicate N/A)	
cif not applicable, indicate N/A)	
cif not applicable, indicate N/A)	
provisions for implementing the amer (if not applicable, indicate N/A)	
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provisions for implementing the amer (if not applicable, indicate N/A)	
if not applicable, indicate N/A)	
if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
provisions for implementing the amer	

The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
8-1-2017		
Effective date if applicable:	(no more than 90 days after amendment file dat	(r)
Note: If the date inserted in this block doe document's effective date on the Department	is not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by t by the shareholders was/were sufficient for	the shareholders. The number of votes cast for the an or approval.	nendment(s)
	the shareholders through voting groups. The following group entitled to vote separately on the amendment	
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
by	<u> </u>	
	voting group)	
☐ The amendment(s) was/were adopted by t action was not required.	the board of directors without shareholder action and	shareholder
■ The amendment(s) was/were adopted by t action was not required.	the incorporators without shareholder action and share	eholder
7-26-17		
Dated		
S		
selected, by an i	resident or other officer – if directors or officers have incorporator – if in the hands of a receiver, trustee, or iary by that fiduciary)	
Wade E	Douty	
	(Typed or printed name of person signing)	
Presiden	ıt	
	(Title of person signing)	