## P160000 16053

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Walson

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	Miller Security, Inc	». 	
DOCUMENT NUMBE	D1 (00001 (053		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
A	lexander Anthony		
_		Name of Contact Person	n
M	filler Security, Inc.		
_		Firm/ Company	
P	O. Box 52-3454		
	·	Address	
M	liami, Florida 33152		
_		City/ State and Zip Cod	e
aanthon	y@paramountsecurity.com		•
-		ed for future annual report	notification)
	`	•	,
For further information	concerning this matter, pleas	e call:	
Alexander Anthony		305	907-3111
	Contact Person	at (305	)
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made p	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)
Amend Divisi P.O. E	ng Address  Idment Section on of Corporations tox 6327 assee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Miller Security . Inc.	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P16000016053	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Drexel Capital Insurance, Inc.	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	7270 NW 12 Street, Suite 420
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Miami, Florida 33126
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 53-3454
	Miami, Florida 33152
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia	<u>ıt:</u>
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: 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	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		·	
Add			
Remove			
3) Change			
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	,		
Remove			
6) Change			
Add			
Remove			

	(Be specific)	
		<b></b> .
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-		
		<del>-</del> .
· .		
an amendment provides for an exclurovisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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orovisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:	
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	

The date of each amendment(s)		, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	t(s)
	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	<b>"</b>	
•	(voting group)	
	adopted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
04/28/20 Dated	016	
Signature	alan all	
(By s	a director, president or other officer – if directors or officers have not bee eted, by an incorporator – if in the hands of a receiver, trustee, or other co	n.
арро	binted fiduciary by that fiduciary)	ш
	Alerxander Anthony	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	