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(Re	questor's Name)			
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MAR 09 2017 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: MACHUAT PROT	TECTIVE SER	VICES INC	
DOCUMENT NUMBER:	D17000012021			
The enclosed Articles of Am	endment and fee are sul	bmitted for fili	ng.	
Please return all corresponde	ence concerning this mat	ter to the follo	wing:	
JUAN	ІЛ МАСНИЛТ			
	··· <u>-</u>	Name of Co	ntact Person	
MAC	HUAT PROTECTIVE S			
				
301 N	IW 177 ST APT 133	Firm/ C	Company	
		Ade	fress	
MIAN	И1 FL 33169			
		City/ State a	ınd Zip Code	
MACHUAT	`007@GMAIL.COM			
•	-mail address: (to be use	ed for future ar	mual report i	notification)
		•		,
For further information conc	erning this matter, please	e call:		
JUANA MACHUAT		at (786	344 2681
Name of Con	tact Person	ar (_	Area Cod	e & Daytime Telephone Number
Enclosed is a check for the fe	illowing amount made n			
enclosed is a check for the R	moving amount thate p	ayame to me r	normalia expan	ingon of start
■ \$35 Filing Fee □	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fili Certified C (Additional enclosed)	Ору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	t Section Corporations		Division Clifton I 2661 Ex	address nent Section of Corporations Building coutive Center Circle see, FL 32301

Articles of Amendment to Articles of Incorporation of

17 MAR -6 #M ID: 25

(Name of Cor	poration as currently	filed with the Florida Dept. of State)
P17000012021		
	Document Number of	Corporation (at known)
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this F	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of	the corporation:	
STATE SECURITY US CORP		The new
name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp, " "Inc, " or "C	" "company," or "incorporated" or the abbreviation of: A professional corporation name must contain the
B. Enter new principal office address, if appl	licahle:	REMAINS THE SAME
Principal office address MUST BE A STREE	T ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
If amending the registered agent and/or registered agent and/or the new registered.		ss in Florida, enter the name of the
new registered agent and/or the new regis		ss in Florida, enter the name of the
new registered agent and/or the new regis	tered office address:	ss in Florida, enter the name of the
new registered agent and/or the new regis	tered office address: AINS THE SAME	
new registered agent and/or the new regis	tered office address:	
new registered agent and/or the new regis	tered office address: AINS THE SAME	

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 D	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add		_		
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
188		
	1////	
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		•
	,	
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
(y not apprendic, material 1971)	·	
		•••

The date of each amendment date this document was signed		, if other than the
Effective date if applicable:	02-27-2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on the	this block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/wer must he separately provide	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	e adopted by the board of directors without shareholder action and shareholder	
action was not required. 02-2 Dated Signature	e adopted by the incorporators without shareholder action and shareholder	
/se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) JUANA MACHUAT	_
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	