91700016839

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800322716628

OI9 JAN TO AMITE LA CALCABASSES.FL

19 JAN 10 AH 10: 3

C GOLDEN JAN 1 1 2019 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 575070 7497062

AUTHORIZATION :

COST LIMIT : \$ 65 00

ORDER DATE: January 9, 2019

ORDER TIME : 8:50 AM

ORDER NO. : 575070-005

CUSTOMER NO: 7497062

DOMESTIC AMENDMENT FILING

NAME: ACUNETIX CORP.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER'S INITIALS:

Articles of Amendment to Articles of Incorporation of

FILED
2019 JAN 10 AM 11:44

Acunetix Corp.			TALL ATTACETS
	oration as currently f	led with the Florida Dept. of State	e) SEE,
17000016839			
(D	ocument Number of Co	orporation (if known)	
fursuant to the provisions of section 607.1006, Fl is Articles of Incorporation:	orida Statutes, this Fla	rida Profit Corporation adopts the	following amendment(s)
. If amending name, enter the new name of the	ne corporation:		
nvicti Security Corp.			
cune must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "(ord "chartered," "professional association," or	Jorp." "Inc." or "Co.	" A professional corneration name	The new rether abbreviation the must contain the
Enter new principal office address, if applic Principal office address MUST BE A STREET	able: ADDRESS)		
	-		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>"BOX</u>)"		
If amending the registered agent and/or reginew registered agent and/or the new register	stered office address red office address:	in Florida, enter the name of the	
Name of New Registered Agent			
	(Florida strect a	idress)	
New Registered Office Address:		, Florida	
	(City)	(Zip Code)
w Registered Agent's Signature, if changing F	Pamiatau d. t		
ereby accept the appointment as registered agen	t. I am familiar with a	and accept the obligations of the po-	sitivn
	,	the pos	
Si	ignature of New Regist	ered Avent 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 <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 Duc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	 -		
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
Remove			
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Remove			

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
~~	
	
I an amendment provides for an excha	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Name of the Autentiment Isset:
	·

date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date vartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sul	nted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were appropriate the separately provided for a	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	n	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	ted by the incorporators without shareholder action and shareholder	
January 3, 2 Dated	019	
Signature		
selected,	ector, president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	 -
I	Pominic Ang	
-	(Typed or printed name of person signing)	
P	resident	
-	(Title of person signing)	