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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: 1 Watch Broward Patrol, INC DOCUMENT NUMBER: P17000020439 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lara Labinjo Name of Contact Person I-Watch Broward Patrol, INC Firm/ Company PO BOX 590844 Address Fort Lauderdale FL. 33359 City/ State and Zip Code iwatchpatrolinc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lara Labinjo Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & **■**\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

Articles of Amendment Articles of Incorporation

IWATCH BROWARD PATROL INC.	
(Name of Corporation as curren	ttly filed with the Florida Dept. of State)
P17000020439	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
I WATCH Securicas, Inc	The new
name must he distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	6880 RALEIGH STREET
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	HOLLYWOOD, FL 33024
	I AL
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 590844
	FORT LAUDERDALE, FL 33359
	- ω - ω
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	
tFlorida s	(treet address)
New Registered Office Address	Florida

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

(Zip Code)

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)

Remove

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: <u>PT</u> X Change John Doe X Remove V Mike Jones <u>X</u> Add \underline{SY} Sally Smith Type of Action Title Address **Name** (Check One) 1) ____ Change ____ Add ___ Remove 2) ____ Change ____ Add Remove 3) ____ Change Add ____ Remove 4) ____ Change ___ Add __ Remove 5) ____ Change ____ Add

tach additional sheets, if necessary).	(Be specific)
	
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(у ног ирунсиле, таксие вом)	
	-

••

The date of each amendment(s) adopt	8/8/2019	'C
date this document was signed.	ion:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departs	does not meet the applicable statutory filing requirements, this canent of State's records.	late will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amendment ent for approval.	(s)
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting groups. The following staten voting group entitled to vote separately on the amendment(s):	nent
	ne amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and sharehold	ler
■ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
8/8/2019 Dated		
Signature X C	Thompson	
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other couduciary by that fiduciary)	
CI	ristopher thompson	
	(Typed or printed name of person signing)	
Pres	ident	
	(Title of person signing)	