P170000 22117

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
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2020 APR 23 AM R: L7



COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	ORATION: ThreatLocker, Inc			
	IBER: P17000022117			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Sami Jenkins			
	Name of Contact Person			
	ThreatLocker, Inc			
	Firm/ Company			
	555 Winderley Place, Suite 300			
	Address			
	Maitland, FI 32751			
	City/ State and Zip Code			
	sami@threatlcoker.com			
	•	sed for future annual report	notification)	
	E-man address. (to be us	sed for rature annual report	nonneation)	
For further informati	on concerning this matter, pleas	se call:		
Sami Jenkins		at (<u>407</u>	920-0490	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee Check#1075	☐\$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		Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

P.O. Box 6327

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

InreatLocker, Inc		 ,
(Name of Corporation as of	currently filed with the Florida Dept. of State)	
P17000022117		
(Document N	umber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the follo	owing amendme
A. If amending name, enter the new name of the corpora	ntion:	
		The new
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must co	viation "Corp.," intain the word
B. Enter new principal office address, if applicable:		203
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
	•	AP 19
C. Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	ThreatLocker, Inc	~ `
	5415 Lake Howell Rd #194	
	Winter Park, Fl 32792	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	•	
Name of New Registered Agent		
ı (Fi	loridu street address)	
New Registered Office Address:	Florida	
		Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		ion
Thereby accept the appointment as registered agent. Tam p	amiliar with and accept the obligations of the positi	on.
Signature o	of New Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, nar 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 : Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officer 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. 1 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 C Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>John</u>	ı <u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	v <u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Board Member	Craig Ellis	1775 Tyson's Place, Suite 500
X Add			McLean
Remove			VA 22102
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach a	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
·	
<u>provisi</u>	nendment provides for an exchange, reclassification, or cancellation of issued shares, ions for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
	
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) ad date this document was signed.	option:	, if other t
Effective date if applicable:	(m. mana than O	0 days after amendment file date)
	(no more than y) aays after amenament file date)
Note: If the date inserted in this bl document's effective date on the Dep		table statutory filing requirements, this date will not be listed
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	oted by the incorporators, or l	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopty the shareholders was/were sufficiently.		e number of votes cast for the amendment(s)
		ough voting groups. The following statement vote separately on the amendment(s):
"The number of votes cast t	or the amendment(s) was/we	re sufficient for approval
by	(voting group)	
	(voting group)	
Dated_16^ A	pril 2020	
Signature		
(By a di selected		eer – if directors or officers have not been e hands of a receiver, trustee, or other court
-	Sani Jen	kins name of person signing)
	(Typed of printed	tame of person signing)
	C00	
	(Title of person sig	gning)