

P15000052702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

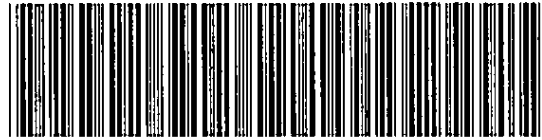
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700376345687

*Amend*

11/10/21--01009--010 \$425.00

2022 JAN 18 AM 9:50  
FILED

A. RAMSEY

JAN 19 2022

\*00789, 00524 00671

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: STRATEGIC FORCE USA INC

DOCUMENT NUMBER: P18000052702

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEVIN BALLINGER

Name of Contact Person

STRATEGIC FORCE USA INC

Firm/ Company

12275 Sabal Palmetto Place

Address

ORLANDO, FL 32824

City/ State and Zip Code

ballingerkevin@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEVIN BALLINGER

at ( 757 )

450-2777

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee



RECEIVED

FLORIDA DEPARTMENT OF STATE 2022 JAN 18 AM 8:04  
Division of Corporations

SECRETARY OF STATE  
TALLAHASSEE, FL

December 2, 2021

KEVIN BALLINGER  
STRATEGIC FORCE USA INC  
12275 SABAL PALMETTO PLACE  
ORLANDO, FL 32824 US

SUBJECT: STRATEGIC FORCE USA INC  
Ref. Number: P18000052702

We have received your document for STRATEGIC FORCE USA INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please sign the amendment form as the new registered agent (see page 1) and as the president (see page 4).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey  
OPS

Letter Number: 721A00028970

Articles of Amendment  
to  
Articles of Incorporation  
of

STRATEGIC FORCE USA INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000052702

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

12275 SABAL PALMETTO PLACE

ORLANDO, FL 32824

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

12275 Sabal Palmetto Place

ORLANDO, FL 32824

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent KEVIN BALLINGER

12275 SABAL PALMETTO PLACE

(Florida street address)

New Registered Office Address: ORLANDO, Florida 32824  
(City) (Zip Code)

**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

See page 4

Signature of New Registered Agent, if changing

Check if applicable

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

FILED  
2022 JAN 18 AM 9:36  
CLERK OF THE STATE  
TREASURY  
HALL, FLORIDA

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:

☒ Change                      PT        John Doe

☐ Remove                        V        Mike Jones

☐ Add                              SV        Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>VPT</u>	<u>PRADIP PATEL</u>	<u>13114 WILSHIRE RUN CT</u>
<input type="checkbox"/> Add			<u>ORLANDO, FL 32828</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>PST</u>	<u>KEVIN BALLINGER</u>	<u>PO BOX 770132</u>
<input checked="" type="checkbox"/> Add			<u>ORLANDO, FL 32877</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

[illegible]

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

[illegible]

10/27/2021

The date of each amendment(s) adoption: \_\_\_\_\_, 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 this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)

10/27/2021  
Dated \_\_\_\_\_

Signature Kevin Ballinger  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

KEVIN BALLINGER

\_\_\_\_\_  
(Typed or printed name of person signing)

PST President / CEO  
(Title of person signing)