## 218000878670

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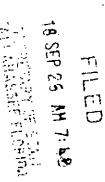
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	EZ Fingerprints Corp						
DOCUMENT NUMBER:	P18000078670						
The enclosed Articles of Amendm	ent and fee are submitted for filing.						
Please return all correspondence c	oncerning this matter to the following:						
	Alicia C. Peralta						
	Name of Contact Person						
	EZ Fingerprints corp						
****	Firm/ Company						
	12741 SW 42nd Street						
	Address						
	Miami, FL 33175						
	City/ State and Zip Code						
aliciapera	lta@comeast.net						
E-mail	address: (to be used for future annual report notification)						
For further information concerning  Alicia C. Peralta	g this matter, please call:  305 461-3910						
Name of Contact P	at ()						
	ing amount made payable to the Florida Department of State:						
	75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee ificate of Status  Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)						
Mailing Addre Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	Amendment Section  porations  Division of Corporations  Clifton Building						

## Articles of Amendment to Articles of Incorporation of

EZ Fingerprints corp	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P18000078670	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Rapid Fingerprinting Corp	✓ The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	12741 SW 42 Street
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33175
	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED SEP 25 AN 7
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida :	street address)
New Registered Office Address:	. Florida
The registered Office radices.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	nt: r with and accept the obligations of the position.
Signature of New	Registered Agent, 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 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change			
Add			
Remove			/
2) Change			/
Add			
Remove			
3 ) Change			
Add			<del></del>
Remove			
4) Change			/
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

f <b>amending or addir</b> Attach <i>additional she</i>	ng additional Articles, enter change(s) here: ets, if necessary). (Be specific)	
	<del></del>	
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	1 1	
	X )   -   -	
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	<u> </u>	
<u>.</u>		
	\ <u>-</u>	<del>.</del>
an amendment provisions for imple	ovides for an exchange, reclassification, or cancellation of issued shares, ementing the amendment if not contained in the amendment itself:	
(if not applicabl	v, indicate N/A)	
	$\sim 1/20$	
	N/A	

	09/23	3/2018		
The date of each amendment(s)	adoption:		·	, if other than the
date this document was signed.				
Effective date if applicable:	23/2018			
Effective date <u>if applicable</u> :	(	(no more than 9	00 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E			cable statutory filing requirements, the	is date will not be listed as th
Adoption of Amendment(s)	(CHE	CK ONE)		
☐ The amendment(s) was/were ac by the shareholders was/were s			e number of votes cast for the amendm	ent(s)
			ough voting groups. The following sta vote separately on the amendment(s):	
"The number of votes cas			• -	
by				
· ,	(voting	g group)		
The amendment(s) was/were ac action was not required.	lopted by the bo	ard of directors	without shareholder action and shareh	nolder
☐ The amendment(s) was/were action was not required.	lopted by the inc	corporators with	nout shareholder action and shareholde	r
DatedSignature	9/23/18	-		
Signature	Perau	tr		
(By a	director, preside	ent or other offic	cer - if directors or officers have not b	een
			e hands of a receiver, trustee, or other	court
арроі	nted fiduciary b	y that fiduciary)	)	
	Alicia C. Pera	ılta		
	(T	yped or printed	name of person signing)	
	Manager	D		
		(Title	of person signing)	<del>.</del>