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PICK-UP WAIT MAIL	
(Business Entity Name)	
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(Document Number)	
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Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
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Office Use Only

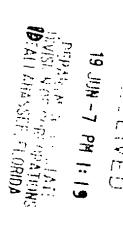


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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: UNITE	D STATE CUSTOMS K9 INC
DOCUMENT NUMBER: P19000045	
The enclosed Articles of Amendment and	I fee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
LAZARO CABRE	:RA
	Name of Contact Person
UNITED STATES	CUSTOMS K9 INC
11·2 4 iii ·	Firm/ Company
2914 COUNTY RO	• •
	Address
OXFORD FL 3448	34
	City/ State and Zip Code
mcabrera17@gmail.com	
E-mail address	s: (to be used for future annual report notification)
For further information concerning this ma	atter, please call:
MARIA CABRERA	at () 986-5824
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	unt made payable to the Florida Department of State:
\$35 Filing Fee	g Fee & S43.75 Filing Fee & S52.50 Filing Fee f Status Certified Copy Certificate of Status (Additional copy is 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

Tailahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

UNITED STATE CUSTOMS K9 INC

(Name of Corporation as currently	filed with the Florida Dept. of State)	12:10
P1900U045284		5:10
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Clorida Profit Corporation adopts the following an	nendment(s
A. If amending name, enter the new name of the corporation:		
UNITED STATES CUSTOMS K9 INC		
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbre	new viation ain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stree	i address)	
New Registered Office Address: (C	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position. tistered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = Cl. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each off 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 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 Chang 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	
<u>X</u> Add	<u>\$V</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			
Remove			
4) Change			
Add			
Remove			
a)			
5) Change	 -		
Add			
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n Change			
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Attach ada	ditional shee	g additional A us, if necessary). (Be spec	cific)	 ′				
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rovision	s for implen	nenting the an indicate N/A)	endment if	not contain	ed in the ar	mendment	<u>ueu snares</u> itself:	<u>.</u>	
(if not	t applicable,	indicate N/A)			·				
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5/23/2019	
The date of each amendment(s) adoption:	r than
Effective date <u>if applicable</u> :	
(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 list document's effective date on the Department of State's records.	ed as
Adoption of Amendment(s) (CHECK ONE)	
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	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
JUNE 6, 2019 Dated Signature Faraco M All	
(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)	
LAZARO CABRERA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	