P20000023960

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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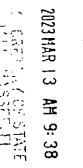
Office Use Only



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6/2/23 VLA



To whom it my concern, this is the letter of acknowledgement certfy the return address and the telephone number and certification requirements:

Address:21459 nw 2nd ave, Miami gardens 33169

Telephone#: 954-8652578

Francis Ayodell

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORP | PORATION: ADVANCE SECU | JRITY AGENCY INC | | |
|--|---|--|---|--|
| | MBER: P20000023960 | | | |
| | les of Amendment and fee are su | abmitted for filing. | | |
| Please return all co | rrespondence concerning this ma | atter to the following: | | |
| | FRANCIS O AYODEJI | | | |
| | | Name of Contact Person | n | |
| ADVANCE SECURITY AGENCY INC | | | | |
| Firm/ Company | | | | |
| | 21459 NW 2ND AVE | | | |
| | | Address | | |
| | MIAMI GARDENS FLORII | DA 33169 | | |
| | | City/ State and Zip Cod | e | |
| | WISLY@PCBHLNET | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| for further informa | tion concerning this matter, plea | se call: | | |
| FRANCIS AYODI | EJI | at (| 8652578 | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | |
| inclosed is a check | for the following amount made | payable to the Florida Depa | artment of State: | |
| S35 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 Tallahassee, FL 32314 | | Amend Division The Co 2415 N | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 | |

Articles of Amendment Articles of Incorporation of

| Λ | DAVA | NOF | CECT | DITY | AGENCY | INC |
|----|------|-----|---------|--------|------------|------|
| 41 | 1100 | | >1*** I | INCLES | ACCIDING 1 | 1001 |

| (Name of Cornoration as current) | ly filed with the Florida Dept. of State) | |
|--|--|--------------------|
| P20000023960 | , | |
| (Document Number of | of Corporation (if known) | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the following: | amendment(s) t |
| A. If amending name, enter the new name of the corporation: | | |
| N/A | | The new |
| name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A." | A professional corporation name must contain | "Corp" the word |
| B. Enter new principal office address, if applicable: | N/A | |
| (Principal office address MUST BE A STREET ADDRESS) | 202 Si | |
| | CAR | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A S | 1-1-1 |
| | min x | |
| | FI. 38 | <u> </u> |
| D. If amending the registered agent and/or registered office add | | |
| new registered agent and/or the new registered office address | <u>ii</u> | |
| Name of New Registered Agent N/A | | |
| (Florida sti | reet address) | |
| New Registered Office Address:N/A | , Florida | |
| | | |

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, 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.

| X Change | <u>PT</u> <u>John</u> | Doc | | | | |
|----------------------------|------------------------|--------------|-----------------------|--|--|--|
| X Remove | <u>V</u> <u>Mike</u> | Mike Jones | | | | |
| <u>X</u> Add | <u>SV</u> <u>Sally</u> | Smith | | | | |
| Type of Action (Check One) | <u>Title</u> | Name | Address | | | |
| 1) Change | VP | WISLY BUTLER | 95-1034 PAKAU STREEET | | | |
| X Add | | | MILILANI HAWAII 96789 | | | |
| Remove | | | | | | |
| 2) Change | | | | | | |
| Add | | | | | | |
| Remove 3) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 6) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |

| /A | rets, if necessary) | (2.2.37.1.5)(7 | | | |
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| lf an amendment nr. | 7710C3 101 411 CA | endment if not | contained in the | amendment itself: | 11 (3) |
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| N/A | |
|--|---------------------|
| The date of each amendment(s) adoption: date this document was signed. | if other than the |
| Effective date if applicable: (no more than 90 days after amendment file date) | |
| (no more than 90 days after amenament file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records. | ot be listed as the |
| 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. | areholder |
| ☐ 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 | |
| FRANCIS AYODEJI ." | |
| (voting group) | |
| | |
| 03/01/2023 Dated | |
| | |
| Signature X Signature | |
| (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) | |
| FRANCIS AYODEJI | |
| (Typed or printed name of person signing) | |
| PRESIDENT | |

(Title of person signing)