P21000076429

(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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(Business Entity Name)			
(Document Number)			
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TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Opsec4 Life Inc			
DOCUMENT NUM	MBER: P21000076429			
	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	James Meehan			
		Name of Contact Person	-	
Opsec4 Life Inc				
Firm/ Company			-	
433 Plaza Real Suite 275				
Address			•	
	Boca Raton, FL 33432			
		City/ State and Zip Code	-	
jay@opsec4life.com				
	E-mail address: (to be us	sed for future annual report notification)		
For further informat	ion concerning this matter, pleas	se call:		2622 DEC
James Mechan		at ()		19
Name of Contact Person Area Code & Daytime Telephone		Area Code & Daytime Telephone Number	ir (g.~< Green	7
Enclosed is a check	for the following amount made	payable to the Florida Department of State:	100	$\ddot{\sim}$
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		20
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

Opsec4 Life Inc				
(Name of Corporation as curre	ently filed with the Florida Dept. of State)	1		
P21000076429				
(Document Number	er of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the fo	ollowing at	mendm	ient(s)
A. If amending name, enter the new name of the corporation:	<u>.</u>			
OpSec4Life Inc		Tł	he ne	w
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 professional corporation name must	reviation "	Corp.,	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)				
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 a new registered agent and/or the new registered office address Name of New Registered Agent		XSVI SECTIONS	2012 050 19	TOTAL SETS OF THE
nume of New Neganorea Agem		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	77.	j f å
(Florida	a street address) . Florida		2: 20	لعساة
ren registered office framess.	(City)	(Zip Code	e)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia		sition.		
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)

Example:

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>	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>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove		-	
5) Change			
Add			
Remove			
6) Change			
Add			<u> </u>
Remove			

. If amending or adding additional Articological (Attach additional sheets, if necessary).	(Be specific)	
. If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
•		
· - · - · · - · · · · · · · · · · · · ·		
		•

	t(s) adoption:	, if other than the
date this document was signed	January 1, 2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file de	ute)
	this block does not meet the applicable statutory filing requirem he Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without share	reholder action and shareholder
	re adopted by the shareholders. The number of votes cast for the ere sufficient for approval.	amendment(s)
	re approved by the shareholders through voting groups. The followed for each voting group entitled to vote separately on the amenda	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
12/ Dated	12/2022	
Signatura	James Meehan	
	by a director, president or other officer – if directors or officers has elected, by an incorporator – if in the hands of a receiver, trustee,	
	pointed fiduciary by that fiduciary)	or other count
	James Meehan	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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