## P22000018846

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JUN 0 8 2022

## COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Pro One Security Services INC P22000018846 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Matthew Ghardour
Name of Contact Person Pro One Seconty Services FNC
Firm/Company
30541 SW 188th CT
Address Homestead FL 33030
City/ State and Zip Code Mathew cq O2 Ognail. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Matthew Ghardour at (786) 445-7086

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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

FIFD

_	- Francisco Brand	
Pro One Secu	urity Services ING Q AM 7.10	
	ly filed with the Florida Bept. of State) RIT 10	
P220000 18	8846 GEORETARY OF STATE	
(Document Number o	of Corporation (if known) TALLARASSEE, FL	
irsuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendme	
If amending name, enter the new name of the corporation:		
SHISHA EXPR	ESS INC The new	
me must be distinguishable and contain the word "corporation," " nc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word	
Enter new principal office address, if applicable:	30541 SW 188th CT	
rincipal office address <u>MUST BE A STREET ADDRESS</u> )	Homestead FL 33030	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	30541 SW 188th CT	
	Homestead FL 33030	
If amending the registered agent and/or registered office add	lress in Florida, enter the name of the	
new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida su	reet address)	
	Florida	
New Registered Office Address:	(City) (Zip Code)	

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.

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	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I)Change	<u>_P</u>	NASSAR, FADIM	8272 SW 29th ST
Add			UNIT 104
X Remove			MIRAMAR, FL 33025
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary,	). (Be specific)			
Change of Cosporal	ion Nane	from	" Pro One Security Ser	nces INC
Change of Cosporat	ess Inc"			
Renoval of Office	er named	Fadi /	N Nassar	
			V	<u></u>
<del></del>				
an amendment provides for an exprovisions for implementing the ar	nendment if not c	cation, or ca ontained in t	ncellation of issued shares, he amendment itself:	
(if not applicable, indicate N/A)		-		
			1	
	1 1 1	,	1	

The date of each amendment(s) ad	option;	, it other than the
date this document was signed.		
Effective date if applicable:	5/3/2022	
	(no more than 90 days after amendment fil	le date)
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requipartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for afficient for approval.	the amendment(s)
	roved by the shareholders through voting groups. The fi- each voting group entitled to vote separately on the ame	
	or the amendment(s) was/were sufficient for approval	
by Pro Che S	ecurity Services FNC	
	(voting group)	
Dated5_/	13/2022	
Signature	tetther Showshi	
(By a dis selected	rector, president or other officer – if directors or officers, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	
	Matthew Ghardour	
•	(Typed or printed name of person signing)	,
	President	<u>,</u>
•	(Title of person signing)	