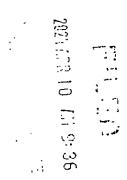
## P22000046948

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:IPS Security Inc				
DOCUMENT NUMB	ER:P22000046948				
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.			
Please return all corresp	oondence concerning this mat	ter to the following:			
	DAVID, SAYED				
•		Name of Contact Person	1		
	IPS Nationwide Inc.				
-	•••	Firm/ Company			
	2425 ALBION AVENUE				
-	Address				
	ORLANDO, FL 32833 US				
-	•••	City/ State and Zip Code	e		
	Contracts@lpsprotection.c	com			
-	<del>-</del> · · ·	ed for future annual report	notification)		
For further information	concerning this matter, pleas	e call:			
David, SAYED		at (	415-7790		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	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)	S52.50 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		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



IPS Security Inc.	-000
(Name of Corporation as curr	rently filed with the Florida Dept. of State)   9: 36
Document number: P22000046948	<u> </u>
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation	<u>ı:</u>
IPS Nationwide Inc.	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 "F	". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
Name of New Registered Agent N/A	
(Floria	la street address)
N/A	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered Agent's Agent's Signature, if changing Registered R	gent:
hereby accept the appointment as registered agent. I am famil	tar with and accept the obligations of the position.
N/A	
Signature of Ne	ew Registered Agent, if changing

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	1		
X Remove	<u>V</u>	Mike Jong	es	NI/A	
X Add	<u>sv</u>	Sally Smi	<u>ith</u>	N/A	
Type of Action (Check One)	<u>Title</u>	Ī	<u>Name</u>		<u>Addres</u> s
1) Change				 	
Add					
Remove					
2) Change					
Add					
Remove Change				 	
Add					
Remove					
4) Change				 	
Add					
Remove					
5) Change					
Add					
Remove					
6) Change				 	
Add					
Remove					

Attach additional sheets	additional Articles, enter changes, if necessary). (Be specific)	<u>eutof iiui u</u> .		
	N/A			
	IWA			
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f an amendment provi	ides for an exchange, reclassific	ation, or cancellation	of issued shares,	
provisions for implem	enting the amendment if not co	ontained in the amend	lment itself:	
(if not applicable,	indicate N/A)			
	N/A		<u>.</u>	
	<del></del> _	<del>_</del>		

•

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days	after amendment file date)
Note: If the date inserted in this be document's effective date on the De		atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board o	f directors without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su		er of votes cast for the amendment(s)
must be separately provided for	proved by the shareholders through vo- each voting group entitled to vote se, for the amendment(s) was/were suffi-	•
by	(voting group)	·
Dated	04/12/2024	
Signature		David Sound
selecte	irector, president or other officer – if d, by an incorporator – if in the hands ted fiduciary by that fiduciary)	
	D	avid Sayed
	(Typed or printed name o	f person signing)
	Ma	maging Director
	(Title of person signing)	