## P23000038491

(Re	questor's Name)
(Ad	dress)
(Ad	dress)
(Cit	ry/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(Bu	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE SEP 2 5 2023
	SEP 2 5 2023

Office Use Only



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08/22/23--01018--022 \*\*52.50



## **COVER LETTER**

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TO: Amendment Section Division of Corporations NAME OF CORPORATION: Good Guard Security, Inc. DOCUMENT NUMBER: P23000038491 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Halmand Tabibzada Name of Contact Person Good Guard Security, Inc. Firm/ Company 21622 Plummer St Suite #200 Address Chatsworth, CA 91311 City/ State and Zip Code compliance@goodguardsecurity.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (800 ) 651-0491 ex. 1052

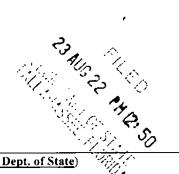
Area Code & Daytime Telephone Number Halmand Tabibzada Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □ \$35 Filing Fee ☐\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



Good Guard Security, Inc.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)				
P23000038491	₩				
(Document Number	of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to				
A. If amending name, enter the new name of the corporation:					
Good Guard Florida, 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 "P.A	A professional corporation name must contain the word				
B. Enter new principal office address, if applicable:	6303 Blue Lagoon Drive, Suite 400				
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Miami, Florida 33126				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	21622 Plummer St Suite # 200				
	Chatsworth CA 91311				
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre					
Name of New Registered Agent					
(Florida )	treet address)				
·	,				
New Registered Office Address:	, Florida (City) (Zip Code)				
	(Esp Cont.)				
New Registered Agent's Signature, if changing Registered Ages I hereby accept the appointment as registered agent. I am familian	nt:				
I hereby accept the appointment as registered agent. I am jumital	with and accept the obligations of the position.				
Signature of New	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)

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 Doc</u>		NA
X Remove	<u>V</u>	Mike Jone	<u>es</u>	
X Add	<u>sv</u>	Sally Smit	<u>th</u>	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	Name:	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	<del></del>			
Add				
Remove				
6) Change				
Add		_	-	
Remove				

E. <u>I</u> 1	<mark>f amendir</mark> Attach <i>ada</i>	itiona	adding ul shee	g ade ts. if	ditio: nece	u <mark>al Art</mark> ssary).	ticles, en (Be s <sub>i</sub>	<mark>iter cl</mark> pecific	nange( :)	s) here	;					
lust	chnagin	g the	e name	of	the	Corpo	ration	from	Good	Guard	Security,	Inc.	to God	od Guard	Florida,	Inc.
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	05/16/2023	
	) adoption:	, if other than the
date this document was signed.		
	8/11/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendi	ment file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filin Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors w	vithout shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes c sufficient for approval.	ast for the amendment(s)
	approved by the shareholders through voting groups for each voting group entitled to vote separately on	
"The number of votes	ast for the amendment(s) was/were sufficient for app	proval
Halmand Tabibza	la	**
by	(voting group)	·
08/11/		
Dated		
Signature	Halmand Tabibzada	
(By	a director, president or other officer – if directors or cted, by an incorporator – if in the hands of a receive binted fiduciary by that fiduciary)	
	Halmand Tabibzada	
	(Typed or printed name of person sign	ning)
	CE0	
	(Title of person signing)	

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: $\frac{Good}{1}$	od Guard Secu	rity, Inc.									
DOCUMENT NUMBER: P23000											
The enclosed Articles of Amendmen	it and fee are su	bmitted for fil	ing.	<del>-</del>							
Please return all correspondence con	cerning this ma	tter to the folio	owing:								
Halmand Tab	Halmand Tabibzada										
	Name of Contact Person										
Good Guard	Good Guard Security, Inc.										
	Firm/ Company										
21622 Plumm	er St Suite:	<b>200</b>									
<del></del>		Ad	dress								
Chatsworth,	CA 91311										
<del>-</del>	<del>-</del>	City/ State :	and Zip Cod	2							
compliance@	goodguardsecu	rity.com									
E-mail ac	ldress: (to be us	sed for future a	nnual report	notification)							
For further information concerning the	nis matter, pleas		800	651-0491 ex. 1052							
Name of Contact Pers	ion	at (	Arca Coo	)							
Enclosed is a check for the following	amount made p	payable to the l		•							
	Filing Fee & ate of Status	S43.75 Fil Certified C (Additional enclosed)	Гору	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)							
Mailing Address Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32.	ations	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303									