## P73000042505

Office Use Only



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## **COVER LETTER**

TO: Amendment Section

 $\mathbf{P}_{\bullet}^{*}$ 

Tallahassee, FL 32303

Division of Corporations				
NAME OF CORPORATION: <u>NIGHTWAWK TACTICAL COR</u> T DOCUMENT NUMBER: <u>P</u> 23000042505	<b>7</b> .			
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Hector Alvarez  Name of Contact Person  NIGHTWAWK Tactroal CORP.  Firm/Company				
Name of Contact Person				
NIGHTWAWK Tactical CORP.				
Firm/ Company				
20531 NW 18 AVE  Address  Miami Gardens, FL 33056  City State and Lip Code				
Address				
Miami Gardens, FL 33056				
City/ State and Zip Code				
Hector alvarez outubre P Mail Com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Hector PlvaRe Z at (486) 6597309  Name of Contact Person Area Code & Daytime Telephone N				
Name of Contact Person Area Code & Daytime Telephone N	umber			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee				
Mailing Address Street Address				
Amendment Section Amendment Section				
Division of Corporations  P.O. Box 6327  Division of Corporations  The Centre of Tallahassee				
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 8	10			

## Articles of Amendment

to

## Articles of Incorporation

of

NIGHTWAWK TACTICAL CON				
	ly filed with the Florida Dept. of State	)		
P. 230000 42 505				
(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 f	ollowing amendment(s) t		
A. If amending name, enter the new name of the corporation:  NIGHTHAWK TACTICAL COR	2P.	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	reviation "Corp.,"		
B. Enter new principal office address, if applicable:	3. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		21		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A.	: ,		
(Maning address MAY DE A POST OFFICE DOA)		<del>-</del>		
		<del></del>		
D. 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 / / A				
/				
(Florida st	reet address)			
New Registered Office Address:	Florida			
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligations of the po	osition.		
/				
$\nu/A$	Registered Agent, if changing			
Signature of New I	Registered Agent, if changing			
Cheel & andiashle				

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>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	/	<u>Addres</u> s
1) Change			NA	
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change			<del></del>	
Add				
Remove				

amending or adding attach additional sheets	s, if necessary). (B	Be specific)			
		N/A			
		<i>N H</i>			
					-
					<del></del>
		_			
		<u>.</u>			
an amendment prov	ides for an exchang	ge, reclassification, or	cancellation of issu	ued shares.	
rovisions for implem	renting the amendn	nent if not contained	in the amendment i	itself:	
(if not applicable,	indicate N/A)	41 / 4			
		N/A			

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Fhe date of each amendment(s) ad	option: 06/22/2023	, if other than the
late this document was signed		
Effective date <u>if applicable</u> :	$\frac{05/31/2023}{(no more than 90 days after amendment file do$	ate)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirem partment 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/were adopaction was not required.	oted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the ficient for approval.	amendment(s)
	roved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amendation	
	or the amendment(s) was/were sufficient for approval	
bv	(voting group)	
-	(voting group) [	
Dated <u>06/</u> Signature <i>H</i>	22/2023 ector Afvarez	
(By a dir selected	rector, president or other officer—if directors or officers hat, by an incorporator—if in the hands of a receiver, trustee, ed fiduciary by that fiduciary)	
	HECTOR ALVAREZ (Typed or printed name of person signing)	
-	(Typed or printed name of person signing)	
	Prosident.	
_	(Title of person signing)	