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SECRETOR BEFORE AND A SECRETOR SECRETOR

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: BLACKHAWK U	NLIMITED PROTECTION	N INC			
DOCUMENT NUME	BER: P25000020220					
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	JOSE LEON					
		Name of Contact Person	1			
	LBS LEON BUSINESS SERVICES LLC					
	Firm/ Company					
	8333 W MCNAB RD STE 114					
	Address					
	TAMARAC FL 33321					
		City/ State and Zip Cod				
	INFO@LEONBUSINESERVICES.COM					
	-	sed for future annual report	notification)			
For further information	n concerning this matter, plea		3239074			
Name o	of Contact Person	at (Area Co	de & Daytime Telephone Number			
	r the following amount made					
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

BLACKHAWK UNLIMITED PROTECTION INC		5 1 1 1 1 5			
(Name of Corpor P25000020220	ration as currentl	y filed with the Fl	orida Dept. of State)	
	cument Number o	f Corporation (if kr	nown)		
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:		•		ollowing ame	ndment(s) to
A. If amending name, enter the new name of the	e corporation:			The	new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp." "In "chartered," "professional association," or the ab	nc." or "Co". 1	1 professional cor		reviation "Co	orp. "
B. Enter new principal office address, if applica	able:	NA		70	
(Principal office address MUST BE A STREET A				THEO IS	
			-	=	
		-			
C. Enter new mailing address, if applicable:		NA			g 43 G 43
(Mailing address MAY BE A POST OFFICE	(BOX)			.U	
				<u> </u>	<u>л</u>
				يمر	
D. If amending the registered agent and/or reginew registered agent and/or the new register			ter the name of the		
Name of New Registered Agent NA					
	(Florida str	eet address)			
New Registered Office Address:			, Florida_		
		(City)	_	(Zip Code)	
New Registered Agent's Signature, if changing I	Registered Agent	:			
I hereby accept the appointment as registered agen	nt. – Lam familiar v	with and accept the	obligations of the po	sition.	
Si	ignature of New R	egistered Agent, if	changing		
Check if applicable					

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: XChange	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	o <u>nes</u>	
X Add	<u>sv</u>	Sally St	niṭḥ	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	VP		CARLOS FERNANDEZ RODRIGUEZ	1339 W 49TH PLACE
X Add				APT 316
Remove				HIALEAH, FL 33012
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_	 	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach a	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
NLY AM	IENDING ADDITION OF NEW MEMBER, THANK YOU	
		
		•
 		
		
16	and the second s	
provisi	nendment provides for an exchange, reclassification, or cancellation of issued shares, ons for implementing the amendment if not contained in the amendment itself:	
(if	not applicable, indicate N/A)	
A		
-		
 -		
	· · · · · · · · · · · · · · · · · · ·	
		

The date of each amendment(s	s) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirem Department of State's records.	ents, 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 without shar	eholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the a sufficient for approval.	ımendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amenda	wing statement nent(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	a director, president or other officer – if directors or officers have	ve not been
sele app	cted, by an incorporator – if in the hands of a receiver, trustee, cointed fiduciary by that fiduciary)	or other court
	GLORIA P LONDONO GIRALDO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	