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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Palm Beach Secur	ity Inc.	
DOCUMENT NUME	BER: P92000014844		
	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Bonnie Marshak		
		Name of Contact Person	1
	Palm Beach Security Inc.		
		Firm/ Company	
	5380 N Ocean Drive, Suite 2	20B	
		Address	
	Singer Island FL 33404		
		City/ State and Zip Cod	e
mars?	57@bellsouth.net		
	E-mail address: (to be us	sed for future annual report	notification)
Dan Bankan Indonesia		a.ll.	
For further information	n concerning this matter, pleas	se can:	
Bonnie Marshak		561 at (de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	ortment of State:
S35 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)
Ame Divi P.O.	ling Address Indment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Palm Beach Security Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P92000014844 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) _, Florida New Registered Office Address: (Citv) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

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 Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	Geoffrey A. Chappell	5380 N Ocean Dr	
Add			Suite 2013	
X Remove			Singer Island FL 33404	
2) Change				
Add			79 Sc. 1.1	
Remove			AUG I	n
3) Change			55R 6	<u></u>
Add			To the second se	ED
Remove			0: 21 0:10A	
4) Change		_	·:	
Add		-		
Remove				
5) Change		_		
Add				
Remove				
6) Change			_	
Add				
Remove				

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	
		
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		TT: 8E:0
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		ARY SSF
If an amendment provides for an exch.	ange, reclassification, or cancellation of issued shares,	_ بب
provisions for implementing the amer	ndment if not contained in the amendment itself:	AM IO:
(if not applicable, indicate N/A)		
		10 HO
		*

08-12-19 The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
08-12-19	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	<i></i>
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	FIL 19 AUG 16
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	•
08-12-19 C 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ED Miller 21
Signature Bonnia Marship (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
BONNIE MARSHAK (Typed or printed name of person signing)	
PPES./DP (Title of person signing)	