# P9400064932

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SECRETARY OF STATE DIVISION OF CORPORATION

# **COVER LETTER**

SECRETARY OF STATE OF VISION OF CORPORATION

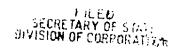
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**TO**: Amendment Section Division of Corporations

NAME OF CORPORATION: AUTOTECH ALARM PEOPLE CORP.  DOCUMENT NUMBER: P9400064932
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SHAMARY DIAZ  Name of Contact Person
AUTOTECH THE ALARM PEOPLE
3611 WEST FLAGLER ST
Miami, FL 33135  City/ State and Zip Code
SHAMARY (DAUTOTECHMIAMI.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SHAMARY DIAZ  Name of Contact Person  at (305) 644-9066  Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)  □ \$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



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### AUTOTECH THE ALARM PEOPLE CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P94000064932	
(Document )	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corpor	ration:
name must be distinguishable and contain the word "co". "Corp.," "Inc.," or Co.," or the designation "Corp.," "I word "chartered," "professional association," or the abbra	The new orporation," "company," or "incorporated" or the abbreviation inc," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>ZZ</u> )
	<del></del>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered o	ffice address in Florida, enter the name of the
new registered agent and/or the new registered offic	e address:
Many of Var Device and Leaves	
Name of New Registered Agent	
_=	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:
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> Joh	nn Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change	ES	VICTORIA DIAZ	3611 WEST FLAGLER ST
Add Remove			Miami. FL 33135
2) Change	<del></del>		
Add			<del></del>
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) (Be specific)			
<del></del>		<del>.</del>		<del> </del>
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<del></del>			·	
	-			
an amendment provides for an excl	ndment if not contain	ned in the amendmen	nt itself:	
provisions for implementing the ame				
(if not applicable, indicate N/A)				
provisions for implementing the ame				
provisions for implementing the ame				<del>-</del> .
provisions for implementing the ame				<u> </u>
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	if other than the
date this document was signed.	
Effective date <u>if applicable</u> : 6.5-18	
Effective date if applicable: $9.5-10$ (no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	e will 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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	г
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 6.5-18	$\alpha$
Dated	
Signature SUDDOO O O O O O O O O O O O O O O O O O	F
(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)	
SHAMARY DIAZ YOSVEL DIA	t Z
(Typed or printed name of person signing)	
V.P. CEO	
(Title of person signing)	<u>_</u>