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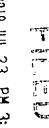
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#### **COVER LETTER**

TO: Amendment Sect Division of Corp					
NAME OF CORPO	RATION: Special Aerospace	Security Services, Inc.			
DOCUMENT NUM	BER:		***		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corre	spondence concerning this man	ter to the following:			
	Kelley DeConciliis				
Name of Contact Person					
Special Aerospace Security Services, Inc.					
Firm/ Company					
	14325 Willard Road, Suite 102				
	Address				
	Chantilly, Virginia, 20105				
		City/ State and Zip Code			
kelley.deco@sassi-va.com					
E-mail address: (to be used for future annual report notification)					
For further information	n concerning this matter, please	e call:			
Kelley DeConciliis		at (	680-9888		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made p	ayable to the Florida Depa	rtiment of State:		
□ \$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)		

Street Address
Amendment Section

Clifton Building

Division of Corporations

Mailing Address

P.O. Box 6327

Amendment Section
Division of Corporations

#### Articles of Amendment to Articles of Incorporation of

Special Aerospace Security Services, Inc.	
(Name of Corporation	on as currently filed with the Florida Dept. of State)
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the con	rporation:
	The new
	d "corporation." "company." or "incorporated" or the abbreviation ""Inc." or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	v Sa - T
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered of	office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Besides A and College Active (Feb. 1981)	Calum I Alam A
New Registered Agent's Signature, if changing Regi	istered Agent: I am familiar with and accept the obligations of the position.
47	
Signe	ture 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 <math>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: $\underline{X}$ Change <u>PT</u> John Doe X Remove $\underline{V}$ Mike Jones $\underline{X}$ Add SVSally Smith Type of Action Title Name Address (Check One) 1) \_\_\_\_ Change \_\_\_ Add \_\_\_ Remove 2) \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove 3 ) \_\_\_\_ Change \_\_\_ Add \_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove 5) Change \_\_\_ Add \_\_ Remove 6) \_\_\_\_ Change \_\_\_ Add Remove

THE BUILDS HIP MITTER SHALL	be added to the articles of incorporation:
<del> </del>	·
ARTICLE VII: PURPOSE	OF THE CORPORATION
The purpose of the Corpora	ation shall be to engage in the provision of training and veterinary care for working dogs
nvolved in capacity buildin	ng support services in foreign countries and for any other lawful activity for which corporations
nay be incorporated in the	State of Florida.
<u> </u>	
<del>-</del>	
<del></del>	
If an amendment provi	des for an exchange, reclassification, or cancellation of issued shares,
provisions for implem	enting the amendment if not contained in the amendment itself:
	indicate N/A)
(if not applicable, i	

.

The dute of such amondature(s)	July 18, 2019	
date this document was signed.	loption:, if c	other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be partment of State's records.	: listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated7-	19-2019	
Signature	rector, president or other officer – if directors or officers have not been	
selected	L by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	