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CECKETANT FRANCE
JALLAHASSEE, FLORIDA

DEC 03 2018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: MASTER INVES	STIGATION & SECURIT	Y, INC
DOCUMENT NU	P00000056053		
The enclosed Articl	es of Amendment and fee are su	ibmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	ANTONIO GONZALEZ		
		Name of Contact Person	on
	GONZALEZ & ASSOCIAT	ES III PA	
		Firm/ Company	
	1820 N CORPORATE LAK	ES BLVD SUITE 204	
		Address	
	WESTON, FL 33326		
		City/ State and Zip Co	de
	AGONZALEZ@AMEFINA	NCIALGROUP.COM	
		sed for future annual repor	t notification)
For further informat	ion concerning this matter, pleas	se call:	
ANTONIO GONZ	ALEZ	at (773-7286
Name of Contact Person		Area C	ode & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 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		Amen Divisi Clifto	t Address dment Section on of Corporations n Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

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MASTER INVESTIGATION & SECURITY, INC.

(<u>Name of Corr</u>		ently filed with the Flor 10056953	rida Dept. of State)	# 25
		er of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Florida Statutes, tl	his <i>Florida Profit Corp</i> o	oration adopts the following	ng amendment(s) to
A. If amending name, enter the new name of N/A	the corporation:	<u>.</u>		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	'Corp," "Inc," o	or "Co". A professiona		bbreviation
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)		N/A		
				18
		N/A	LANASSEE, FLORIDA	FILED NOV 26 PH 14 38
D. If amending the registered agent and/or re new registered agent and/or the new registered			r the name of the	
Name of New Registered Agent Name of New Registered Agent				
	N CORPORATE	LAKES BLVD		- • .
	(Florida	i street address)		-
	ON		. Florida 33326	
New Registered Office Address:				

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_	NA	
Add				
Remove				
2) Change		_	N/A	
Add				
Remove				
3) Change		_	N/A	
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach ad	ling or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)
N/A	
<u>.</u> _	
_	
<u> </u>	· · · · · · · · · · · · · · · · · · ·
_	
. <u>If an ame</u>	endment provides for an exchange, reclassification, or cancellation of issued shares, ons for implementing the amendment if not contained in the amendment itself:
(if n	not applicable, indicate N/A)
N/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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, document's effective date on the Department of State's records.	this date 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 amend by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following smust 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder was not required.	eholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	der
Dated	Sign
Signature	
(By a director, president or other officer - if directors or officers have no	
selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)	er court
ANDRES PEREZ JR	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	