V44336

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Consumer Asset Protectors, Inc.					
DOCUMENT NUMBER: V44336					
The enclosed Articles of Amendment and fee are s	ubmitted for filing.				
Please return all correspondence concerning this ma	Please return all correspondence concerning this matter to the following:				
Lionel Bregetti					
	Name of Contact Persor	1			
Consumer Ass	set Protectors,	Inc.			
	Firm/ Company				
5001 S. University Drive, Suite H					
	Address				
Davie, FL 332					
	City/ State and Zip Code				
consumerprotecto	ors@gmail.cor	n			
	used for future annual report				
For further information concerning this matter, plea	ase call:				
Lionel Bregetti	at (954	434-8660			
Name of Contact Person		de & 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	□\$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	Street	Street Address			
Amendment Section	Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314		executive Center Circle			
	Tallaha	assee. FL 32301			

Articles of Amendment to Articles of Incorporation



Consumer Asset Protectors, Inc. (Name of Corporation as currently filed with the Flow V44336	2012 AUG - 6 PM 4: 04
(Name of Corporation as currently filed with the Fl	orida Dept. of State
V44336	SECKETARY OF STATE SECKETARY OF STATE TALLAHASSEE FLORIDA
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
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:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Registered A	gent, 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 Do	0 <u>e</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	·· -			
Add				
Remove				
2) Change				
Add				
Remove				
3) Change	 			
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:					
(Attach additional sheets, if necessary). (Be specific) Changing purpose of company from Insurance					
Agency to Emergency Alarm Systems and Home					
Health Care Planning.					
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,					
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)					
N/A					

The date of each amendment(s) adoption: July 25, 2012				
Effective date if applicable:				
<u> </u>	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.			
	yed by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):			
"The number of votes cast for	the amendment(s) was/were sufficient for approval			
by				
	(voting group)			
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and shareholder			
The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder			
Dated July 25 Signature	5, 2012			
(By a dive	ctor, president or other officer 11 directors or officers have not been			
	y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)			
<u>L</u>	ionel Bregetti			
(Typed or printed name of person signing)				
P	resident			
	(Title of person signing)			