F120000002012

(Requestor's Na	ame)
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(Address)	 -
(City/State/Zip/F	Phone #)
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(Business Entit	y Name)
(Document Nur	nber)
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RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195				
REFERENCE : 342517 156084A				
AUTHORIZATION : TO A COLOR				
COST LIMIT : \$ 35.00				
ORDER DATE: December 21, 2021				
ORDER TIME : 10:26 AM				
ORDER NO. : 342517-164				
CUSTOMER NO: 156084A				
~				
CHANGE OF AGENT				
NAME: U. S. SECURITY ASSOCIATES AVIATION SERVICES, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Alexxis Weiland				
EXAMINER'S INITIALS:				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.050 inge is submitted for a corporation orga ir to change its registered office or regis.	nized under the laws of the State of \overline{D})E	
1. The name of t	he corporation: U.S. SECURITY A	ASSOCIATES AVIATION SI	ERVICES, INC	Э.
	office address: 161 Washington Street			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 05/10/2012	Document number: F1200000)2012	
	I street address of the current registered attent of State: (If resigned, enter resign		ı the	
	CT CORPORATION SYSTEM			
	1200 SOUTH PINE ISLAND RD		. 21	
	PLANTATION, FL 33324		LZZ	
6. The name and (if changed):	street address of the new registered age		2022 JAN 18 MM 9: 0: SECRILARY OF STATE	
	Corporation Service Company	**************************************		المسارة
	1201 Hays Street		10.	
		ox NOT acceptable	ភព 🚤	
	Tallahassee	FL 32301		
The street addre as changed will	ess of its registered office and the street be identical.	t address of the business office of its	registered agent,	
Such change wa authorized by th	is authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directors or by an obtilied in writing of the change.	fficer so	
	Que E. Clanie	Jill Cilmi, Vice President		
Signatur	e of an officer or director	Printed or typed name and title		
l further agrée t ôf my duties, and document is beit corporation has	the appointment as registered agent an o comply with the provisions of all stat d I am familiar with and accept the ob- ng filed merely to reflect a change in the been notified in writing of this change n Service Company	tutes relative to the proper and comp ligation of my position as registered of the registered office address. I hereby	elete performance agent. Or, if this confirm that the	
By: 🏻 🗴	use tokuby	01/18/2022		
Sign	nature of Registered Agent	Date		
lf signing on bel	half of an entity:			
	Asst. Vice President ped or Printed Name			
	* * * FILING FI	EE: \$35.00 * * *		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl. 32314 CR2E045 (04/13)