Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210003484883)))



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·	Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.			
	To:	Division of Corporations Fax Number : (850)617-6380	SEP 17 A	
PH 12: 57	From:	Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845	AM 10: 17	
24의 SEP 20	ann	the email address for this business entity to be used for future unual report mailings. Enter only one email address please.**		

REGISTERED AGENT CHANGE PREMIER FIRE & SECURITY, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

PLEASE HONOR ORIGINAL FILE DATE OF 9/17/2021

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

statement of cha	ange is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Kentucky	
		tered agent, or both, in the State of Florida.	
1. The name of	the corporation: Premier Fire & Security,	Inc.	
2. The principal	office address: 1251 North 6th Street, Pad	lucah, KY 42001	
3. The mailing a	address (if different): PO Box 1037, Padu	cah, KY 42002	
4. Date of incor	poration/qualification: 04/29/2013	Document number: F13000001868	
5. The name and		agent and registered office on file with the	
	Corporation Service Company		202
	1201 Hays Street		2021 SEP
	Tallahassee, FL 32301-2525		7 7
6. The name ark (if changed):	d street address of the new registered age	int (if changed) and /or registered office	2021 SEP 17 AM 10:
	C T Corporation System		7
	1200 South Pine Island Road		
	Р,О. Во	NOT acceptable	
	Plantation, Florida 33324		
· -		address of the business office of its registered a	igent.
Such change wa authorized by the	as authorized by resolution duly adopted he board, or the corporation has been no	d by its board of directors or by an officer so office in writing of the change.	
And	led the	Andrea Fike, Secretary	
i hereby accept I further agree to of my duties, and document is bei corporation has CT Corporation	id I am familiar with and accept the obling filed merely to reflect a change in this been notified in writing of this change.	Printed or typed name and title and agree to act in this capacity, tates relative to the proper and complete perfori ligation of my position as registered agent. Or, the registered office address, I hereby confirm the	nance if this at the
teskan	nature of Registered Agent	09/16/2021	
_	half of an entity:	PAUL	
	ncz, Assistant Secretary yped or Printed Name		
	* * * FILING FE	EE: \$35.00 * * *	
M.	MAKE CHECKS PAYABLE TO FLO AIL TO: DIVISION OF CORPORATIONS, P	ORIDA DEPARTMENT OF STATE .O. BOX 6327, TALLAHASSEE, FL 32314	

CR2E045 (04/13)

By: