

508446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

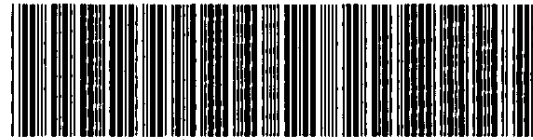
(Business Entity Name)

(Document Number)

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JUN 23 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Kent Security Services, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** G 08446

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Gil Neuman  
Name of Contact Person

Kent Security Services, Inc.  
Firm/Company

14600 Biscayne Boulevard  
Address

North Miami Beach, FL 33181  
City/State and Zip Code

gneuman@kentsecurity.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gil Neuman at ( 305 ) 919-9400  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Kent Security Services, Inc.
- 2. The principal office address: 14600 Biscayne Boulevard  
North Miami Beach, Fl. 33181
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 11/11/1982 Document number: G08446
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) \_\_\_\_\_

Orly Alexander  
248 Bal Bay Drive  
Bal Harbour, Fl. 33154

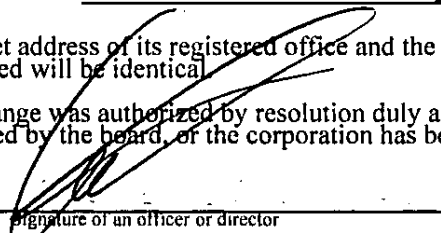
- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Orly Alexander  
14600 Biscayne Boulevard  
P.O. Box NOT acceptable  
North Miami Beach, Fl. 33181

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 TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
 \_\_\_\_\_  
 Signature of an officer or director

Gil Neuman, CEO  
 \_\_\_\_\_  
 Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
 \_\_\_\_\_  
 Signature of Registered Agent

6/14/2010  
 \_\_\_\_\_  
 Date

If signing on behalf of an entity:  
Orly Alexander  
 \_\_\_\_\_  
 Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*