## 136835

(R	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
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SECRETARY OF STATE

Marion Contract

## COVER LETTER

Amendment Section
Division of Corporations Kent Security of Palm Beach, Inc. SUBJECT: (Name of Corporation) L36835 DOCUMENT NUMBER: 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, CEO (Name of Contact Person) Kent Security of Palm Beach, (Firm/Company) 14600 Biscayne Blvd. (Address) North Miami Beach, FL 33181 (City/State and Zip Code) For further information concerning this matter, please call: Gil Neuman, CEO 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: Street Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

**∉** , TO:

## 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 of Palm Beach, Inc.
2. The principal office address: 14600 Biscayne Blvd., North Miami Beach, FL 331
3. The mailing address (if different):
4. Date of incorporation/qualification: 12/18/1989 Document number: L36835
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
David Serns, Esq.
17101 NE 19th Ave.
North Miami Beach, FL 33162
North Miami Beach, FL 33162  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Gil Neuman
143 Nighthawk Ave.
(P.O. Box NOT acceptable) Plantation, FL 33324
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.
(Signatury of an officer or director)  Orly Alexander, CFO (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.
O8/29/08  O8/29/08  (Date)
If signing on behalf of an entity:
Gil Neuman (Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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