

PO5 000054067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

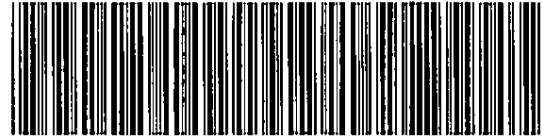
(Business Entity Name)

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TALLAHASSEE, FL

A.P.H.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: State Alarm Inc
Name of Corporation

DOCUMENT NUMBER: P05000054067

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:

Valerie Luchette
Name of Contact Person
State Alarm Inc. Corporate Office
Firm/Company
5956 Market St
Address
Youngstown, OH 44512
City/State and Zip Code
ap@statealarm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Valerie Luchette at (330) 726-9978 ext 120
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

