

PO5000049009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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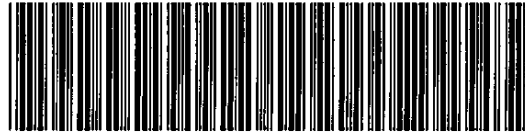
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** COOPER SECURITY & INVESTIGATION INC

**DOCUMENT NUMBER:** P05000049009

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BERNARD SUTTER  
(Name of Contact Person)

ACCOUNT ON US INC  
(Firm/ Company)

1207 ILLINOIS AVE  
(Address)

ST CLOUD FL 34769  
(City/ State and Zip Code)

For further information concerning this matter, please call:

BERNARD SUTTER at ( 407 ) 892-1266  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$35 Filing Fee

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\$52.50 Filing Fee  
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**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



