

L19000140372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

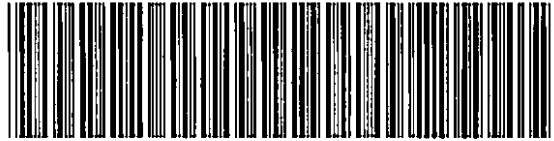
(Document Number)

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05/21/20--01008--007 **25.00

FILED
2020 JUL -6 AM 10:09

FILED

JUL 07 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 JUN 10 12:07

June 10, 2020

GARRY TELEMAQUE
1136 NW 7TH TERRACE
FORT LAUDERDALE, FL 33311

SUBJECT: PROTECTION PLUS SERVICES LLC
Ref. Number: L19000140372

We have received your document for PROTECTION PLUS SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 020A00011401

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Protection Plus SERVICES LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GARY TELEMARQUE
Name of Person

Firm/Company

1136 NW 7TH TERRACE
Address

FORT LAUDERDALE FL 33311
City/State and Zip Code

DARYL60240GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARY TELEMARQUE at (239) 298-9172
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Protection Plus SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2020 JUL -6 AM 10:09
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 5/24/2019 and assigned Florida document number L19000140372.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SECURITY ONE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1136 NW 7TH TERRACE
FORT LAUDERDALE FL 33311

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1136 NW 7TH TERRACE
FORT LAUDERDALE FL 33311

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

GARY TEKEMAGLE


New Registered Office Address:

1136 NW 7TH TERRACE FORT LAUDERDALE
Enter Florida street address

FORT LAUDERDALE, Florida 33311
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


If Changing Registered Agent, Signature of New Registered Agent

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated _____, 05/15/2020

Signature of member or authorized representative of a member

Garry - Ilemague
Typed or printed name of signee

Filing Fee: \$25.00