I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under	
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears	
above, or on an attachment with all other like empowered.	

PRESIDENT

SIGNATURE: AARON LEVITT

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# L56313

Entity Name: ALARM TRUST OF FLORIDA, INC.

Current Principal Place of Business:

1440 N. 64TH AVENUE HOLLYWOOD. FL 33024

Current Mailing Address:

1440 N. 64TH AVENUE HOLLYWOOD, FL 33024 US

FEI Number: 65-0176192

Name and Address of Current Registered Agent:

GORDON, HOWARD W ESQ. 1395 BRICKELL AVENUE 14TH FLOOR MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: HOWARD W. GORDON			09/12/2022		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	D	Title	DP			
Name	LEONE, JOHN G	Name	LEVITT, AARON E			
Address	8650 NW 10 PLACE	Address	1440 N. 64TH AVE			
City-State-Zip:	PLANTATION FL 33322	City-State-Zip:	HOLLYWOOD FL 33024			
Title	DVPST	Title	OFFICER			
Name	LEVITT, MARK	Name	MCDANIEL, MICHAEL			
Address	5761 SW 31ST AVE	Address	500 CANOPY WALK LANE			
City-State-Zip:	FOR LAUDERDALE FL 33312	City-State-Zip:	#534 PALM COAST FL 32137			

Certificate of Status Desired: No

09/12/2022 Date

FILED Sep 12, 2022 **Secretary of State** 9274921283CC