			Certificate of Status Desi	ieu. res	
Name and Ad	dress of Current Registered Agent:				
FLORIDA SECUR 4314 BROWNING ROCKLEDGE, FL					
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:	SAMUEL LOUIS RIPOSTA			01/06/2020	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title N	MGRM	Title	MGRM		
Name F	RIPOSTA, SAMUEL L	Name	RIPOSTA, ELLEN		
Address 4	4314 BROWNING LANE	Address	4314 BROWNING LANE		

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L13000060469

Entity Name: FLORIDA SECURITY ALARMS, LLC

Current Principal Place of Business:

1270 N WICKHAM ROAD SUITE 16-801 MELBOURNE, FL 32935

Current Mailing Address:

4314 BROWNING LN ROCKLEDGE, FL 32955-6701 US

FEI Number: 46-2626692

Na

City-State-Zip: ROCKLEDGE FL 32955

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE:	ELLEN RIPOSTA

MGRM

City-State-Zip: ROCKLEDGE FL 32955

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 06, 2020 Secretary of State 1233603713CC

Certificate of Status Desired: Yes

Date