I berefy cortify that the information indicated on this report or symplemental report is true and accurate and that my electronic signature shall have the same

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: JOSE R NINA MONTAN	AMBR	04/30/2015
Electronic Signature of Signing Authorized Person(s) Detail		Date

DOCUMENT# L14000011852

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: SECURITY SMART SHOP, LLC

Current Principal Place of Business:

8181 NW 36 STREET 14F DORAL, FL 33166

Current Mailing Address:

8181 NW 36 STREET 14F DORAL, FL 33166 US

FEI Number: 30-0836166

Name and Address of Current Registered Agent:

JELEN ACCOUNTING SERVICES INC 8181 NW 36 STREET 13AB DORAL, FL 33166 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	: JORGE RAMIREZ			04/30/2015		
	Electronic Signature of Registered Agent			Date		
Authorized Person(s) Detail :						
Title	AMBR	Title	AMBR			
Name	NINA MONTAN, JOSE R	Name		3		
Address	8181 NW 36 STREET 14F		SERVICES			
		Address	8181 NW 36 STREET 14F			
City-State-Zip:	DORAL FL 33166					
		City-State-Zip:	DORAL FL 33166			

Certificate of Status Desired: No