I, FL 3314	47 US						
oove named	l entity submits this statement for the purpose of changing its	s registered office or regist	tered agent, or both, in the State of	Florida.			
NATURE	: FRANTZ ALPHONSE			02/09/2022			
	Electronic Signature of Registered Agent			Date			
orized Person(s) Detail :							
	MANAGER	Title	AUTHORIZED MEMBER				
)	ALPHONSE, FRANTZ	Name	JEAN, NIKENSON				
ess	1418 NW 100 TH ST	Address	1418 NW 100 ST				
State_Zin:	MIAMI EL 33147	City-State-Zin	MIAMI EL 33147				

# 2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# L19000069334

Entity Name: SIDLAY UNITED SECURITY LLC

### **Current Principal Place of Business:**

1418 NW 100 TH ST MIAMI, FL 33147

#### **Current Mailing Address:**

1418 NW 100 TH ST MIAMI. FL 33147 US

## FEI Number: 83-3905703

## Name and Address of Current Registered Agent:

ALPHONSE, FRANTZ 1418 NW 100 TH ST MIAMI,

SIGN

Authorized Person(s) Detail :					
Title	MANAGER	Title	AUTHORIZED MEMBER		
Name	ALPHONSE, FRANTZ	Name	JEAN, NIKENSON		
Address	1418 NW 100 TH ST	Address	1418 NW 100 ST		
City-State-Zip:	MIAMI FL 33147	City-State-Zip:	MIAMI FL 33147		

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: ALPHONSE FRANTZ

02/09/2022

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 09, 2022 Secretary of State 4598980423CC

Certificate of Status Desired: No