

F000000004533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

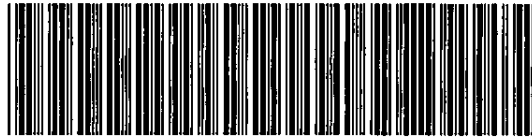
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 NOV -7 AM 9:00

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Koorsen Protection Services, Inc  
(Name of Corporation)

DOCUMENT NUMBER: F0000000 4533

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joe Bucart  
(Name of Contact Person)

Koorsen Fire & Security, Inc  
(Firm/Company)

27101 N Arlington Ave  
(Address)

Indianapolis IN 46218  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joe Bucart at ( 317 ) 616-6611  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 27, 2006

JOE BURGERT  
2719 N. ARLINGTON AVE.  
INDIANAPOLIS, IN 46218

SUBJECT: KOORSEN PROTECTION SERVICES, INC.  
Ref. Number: F00000004533

*File after name change!*

We have received your document for KOORSEN PROTECTION SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name you have listed on the form does not match the document number you provided.

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) 245-6964.

Irene Albritton  
Document Specialist

Letter Number: 506A00063973

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of IN in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Koorsen Fire & Security, Inc
2. The principal office address: 2719 N Arlington Ave, Indianapolis  
IN 46218
3. The mailing address (if different): same
4. Date of incorporation/qualification: 8/7/2000 Document number: FOOOOOO04533
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

MARK MURRAY  
1860 IRIS Lane  
NAVARe FL 32566

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Joseph A Genovese  
8725 Bay River Rd  
(P.O. Box NOT acceptable)  
NAVARe FL 32566

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SECRETARY OF CORPORATIONS  
06 NOV -7 AM 9:00

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Joseph A Genovese  
(Signature of an officer or director)

JOE BURGERT  
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Joseph A Genovese  
(Signature of Registered Agent)

10/23/06  
(Date)

If signing on behalf of an entity:

Joseph Genovese  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*