

F02000005968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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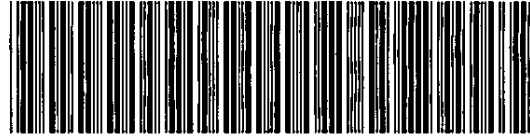
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Security Equipment Corporation
Name of Corporation

DOCUMENT NUMBER: F02000005968

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:

Robert D. Nance
Name of Contact Person

Security Equipment Corporation
Firm/Company

747 Sun Park Dr.
Address

Fenton, MO 63026
City/State and Zip Code

rnance@subred.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Nance at (636) 343-0200
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

November 20, 2015

ROBERT D. NANCE
SECURITY EQUIPMENT CORPORATION
747 SUN PARK DR
FENTON, MO 63026

SUBJECT: SECURITY EQUIPMENT CORPORATION OF MISSOURI
Ref. Number: F02000005968

We have received your document for SECURITY EQUIPMENT CORPORATION OF MISSOURI 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 registered agent must sign accepting the designation.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 915A00024602

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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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Security Equipment Corporation
2. The principal office address: 747 Sun Park Dr.
Fenton, MO 63026
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/3/2002 Document number: F02000005968

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Barnard, Robert Mr.
12693 Headwater Circle
Wellington, FL 33414

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

Mark Altman - GL Distributors
18459 Pines Boulevard # 340
P.O. Box NOT acceptable
Pembroke Pines, FL 33029

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.




Signature of an officer or director

Michael J Patterson, Law Enforcement

Printed or typed name and title Sales Manager

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.



Signature of Registered Agent

11-2-2015

Date

If signing on behalf of an entity:

Mark Altman

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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