Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: NRAI CORPORATE SERVICES, INC.-IRVINE

Account Number : I20080000054 Phone

: (949)955-9585

Fax Number

: (800)562-6504

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

u,≸mail Address:

REGISTERED AGENT CHANGE LASER COURIER INC.

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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI	ECT: Paragon Systems, Inc (Name of Corporation)
DOCI	UMENT NUMBER: F04000002726
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Nicole Chouinard
	(Name of Contact Person)
	C/O NRAI Corporate Services, Inc.
	(Firm/Company)
	2875 Michelle Drive, Suite 100 (Address)
	(Addition)
	Irvine, CA 92606
	(City/State and Zip Code)
For fur	ther information concerning this matter, please call:
	Nicole Chouinard at (949) 955-9585 (Name of Contact Person) (Area Code & Daytime Telephone Number)
	(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclos	ed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Street Address: Amendment Section
	Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

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

statement of change is submitted for a cor	.0502, 617.0502, 607.1508, or 617.1508, Florida Slatutes, this poration organized under the laws of the State of Alabama
•	office or registered agent, or both, in the State of Florida. Paragon Systems, Inc
1. The name of the corporation:	
 The principal office address: 14160 Net Chantilly, VA 20151 	WINDOW Dr., State 210
4. Date of incorporation/qualification: 5/1	8/2004 Document number: F0₹000002726
	ent registered agent and registered office on file with the
CT Corporation Sys	stem
1200 South Pine Isl	and Road
Plantation, FL 3332	4
6. The name and street address of the new (if changed):	registered agent (if changed) and /or registered office
NRAI Services, II	nc.
2731 Executive F	Park Drive, Suite 4
•	lox NOT acceptable)
Weston, FL 33	331
The street address of its registered office as changed will be identical.	and the street address of the business office of its registered agent,
	on duly adopted by its board of directors or by an officer so on has been notified in writing of the change.
(Signature of an officer or, director)	Timothy A. Frank, CEO, Tres., Sec.
• •	tered agent and agree to act in this capacity ions of all statutes relative to the proper and complete performance accept the obligation of my position as registered agent. Or, if this a change in the registered office address, I hereby confirm that the
Micole Chounced (Signature of Registered Agent)	9/88/8010 (Date)
If signing on behalf of an entity:	
Nicole Chouinard, Assistant Secr	retary_
• • •	* RILING FFE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)