Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

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

Email Address:

REGISTERED AGENT CHANGE ADVANCED TECH SECURITY INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

COVER LETTER

SUBJECT:	ADVANCED TECH		
	Name of	Corporation	
DOCUMENT NUMBER: F05000006000			
The enclosed Statement	of Change of Registered Offi	ce/Agent and fee are submitted for filing.	
Please return all corresp	condence concerning this matt	er to the following:	
	Name of C	ontact Person	
	Firm/C	Company	
		druss	
	City/State a	nd Zip Code	
E-m	ail address: (to be used for	future annual report notification)	
For further information o	concerning this matter, please	call:	
Name of	Contact Ferson	at () Area Code & Daytime Telephone Number	
Snclosed is a \$35.00 che	ck made payable to the Depar	tment of State.	
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations	
Į.	P.O. Box 6327	Clifton Building	
7	fallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

CR2E045 (8/05)

TO:

Amendment Section Division of Corporations

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

statement of ch	sange is submitted for a con	poration organiza	607.1508, or 617.1508. Flor ed under the laws of the Sicte ed agent, or both, in the Szate	of California	
		CED TECH SECU	-	19 1 107 Mile	
		nyth Drive, Valenc	ia, CA 91355		
3. The mailing	address (if different): 475	Park Avenue Sout	h, Suite 1203, New York, NY	10016	
4. Date of incom	poration/qualification:	10/17/2005	Document number:	F05000006000	
	d street address of the current atment of State; (If resigns		nt and registered office on fil	with the	
	NRAI SERVICES, INC.			** 	
	515 BAST PARK AVENUB				
	TALLAHASSEE PL 3230	1 US			
6. The name and (if changed):	d street address of the new	registered agent (if changed) and /or registered	loffice F	
	C T Corporation System				
	c/o C T Corporation System				
		P.O. Box NOT so	oephilo		
	Plantation, Florida 33324			_ _	
The street address changed will	ess of its registered office be identical.	and the street add	iresa of the business office of	of its registered agent,	
Such ahange we nuthorized by t	as anthorized by resolution to board, or the corporation	n duly adopted by in has been notifi	the board of directors or by cd in writing of the change.	an officer so	
14			Florence Mercer	on, VP	
A STOP TO	o of an officer or ditactor		Priorical St. (Speed section &		
hereby accept further agree to fmy duties, and locument is beli corporation has	the appointment as regist to comply with the provisi d I and familiar with and a ng filed mersty to reflect a been notified in writing o	ered agent and a ons of all statutal recept the obligat schauge in the re of this change.	eree to act in this capacity, i relative to the proper and tion of my pastion as regist gistered office address, I he	complete performance ered agent. Or, if this treby confirm that the	
	Corporation System	Ç	5/12/2011		
	INDIA OF KINGMOND AREM		Date	· · · · · · · · · · · · · · · · · · ·	
signing on bel	half of an entity:				
-	Kristin Bolden				
4	saistaná figoretary		•		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEP, FL 32314
CRZEO45 (8/05)