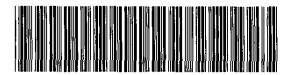
## F0800000 1227

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DATE: 5/12/2015

NAME: LUMENSION SECURITY, INC.

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE/

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

1. The name of the corporation:	ENSION SECURI	TY, INC.	·
2. The principal office address:8660 E. Hartford Drive #300	Scottsdale	AZ	85255
3. The mailing address (if different):	· · · · · ·		
3270 Suntree Blvd., Suite #2225-2227	Melbourne	FI	32940
4. Date of incorporation/qualification: March 19, 200	08 Document number:	F080000	01227
5. The name and street address of the current registered age Florida Department of State: (If resigned, enter resigned)	ent and registered office on	file with the	
CT Corporation	n System		
1200 South Pine I	sland Road		٠
Plantation, FL	33324		5 HAY
			=
5. The name and street address of the new registered agent (if changed):	(if changed) and /or register	red office	~
National Corporate Resea	arch, Ltd., Inc.		AH IO:
155 Office Plaza Drive			8 † :
P.O. Box NOT acc	ceptable		
Tallahassee, FL 32301	,	· —	
The street address of its registered office and the street ad schanged will be identical.	dress of the business office	of its register	ed agent,
such change was authorized by resolution duly adopted by uthorized by the board, or the corporation has been notifi	y its board of directors or b	y an officer so	
- Of-	Cary Baker	CFO	
Signature of an officer or director	· •		
hereby accept the appointment as registered agent and a further agree to comply with the provisions of all statute erformance of my duties, and I am familiar with and acc	igree to uct in this cupacity is relative to the proper an ept the obligation of my po	, d complete șition as regisi	ter <u>e</u> d
erformance of my duities, and I am familiar with and acc gent. Or, if this document is being filed merely to reflect ereby confirm that the corporation has been notified in w	a change in the registered vriting of this change.	office address	, 1
Seen Home	5/12/2015	•	•

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

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