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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 : (850)521-0821 Phone Fax Number : (850)558-1515

\*\*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 ALARM TEAM, INC.



Certificate of Status	0
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JUN 1 5 2012

T. BROWN

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

Pursuant to the provisions of sections 607.0302, 617.0502, statement of change is submitted for a corporation organizin order to change its registered office or register	red under the laws of the State of North Carolina	
1. The name of the corporation: ALARM TEAM, INC.	•	
2. The principal office address: 5305 Raynor Road, Ste	100, Garner, NC 27529	
3. The mailing address (if different):		
4. Date of incorporation/qualification: 06/27/2008		
5. The name and street address of the current registered ag Florida Department of State:	ent and registered office on file with the	
Business Filings Incorporated		
515 E. Park Avenue		12
Tallahassee, FL 32301		NO N
6. The name and street address of the new registered agent (if changed):		E P
Corporation Service Company		يې لان يې
1201 Hays Street (P.O. Box NOT acceptable)		
Tallahassec, FL 32301		
The street address of its registered office and the street as changed will be identical.		
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been no	tified in writing of the change.	
) Jul Hell	David Hall, Vice President of Finance	
I hereby accept the appointment as registered agent an I further agree to comply with the provisions of all state of my duties, and I am familiar with and accept the oblidocument is being filed merely to reflect a change in the corporation has been notified in writing of this change.	d agree to act in this capacity,	?
Corporation Service Company  By: And And Agent  (Signature of Registered Agent)	G/13/2012 (Date)	
If signing on behalf of an entity:		
Sylvia Queppet, Asst. Vice President		
(Typed or Printed Name)		
* * * FILING FE	EE: \$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)