(Requestor's Name)  (Address)  (Address)	500238111565			
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	08/06/1201009020 **35.00			
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	SECRETARIAN PH 3: 06			

Office Use Only



July 31, 2012

Division of Corporations Florida Department of State P.O. Box 6327 Tallahassee, FL 32314

**RE: United Security Alliance, Inc.** 

Dear Sir or Madam:

Enclosed please the Statement of Change of Registered Office and Agent for Limited Liability Company application for the above mentioned. Also enclosed is the required \$35 filing fee.

Please file with your office and return evidence to my attention at the letterhead address. If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Client Specialist

nnagel@nrai.com

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

statement of cha	provisions of sections 607.0502, 6. inge is submitted for a corporation r to change its registered office or	organized under the la	ws of the State of	Wisconsin	
1. The name of t	he corporation: United Secur	ity Alliance, Inc.			
2. The principal	office address: 8900 N. Arbone, WI 53223	n Drive			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 10/14/20	)11 Document	number: F1100	00004153	
	d street address of the current regis tment of State: (If resigned, enter i		ed office on file w	vith the	
	Robert W. Pyles			F 2	
	4830 W. Kennedy Boule	vard, Suite 300		2812 AUG SECSEIA	****
	Tampa, FL 33619-4338			10 -6 10.87	ا الاستان العالم
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) ar	nd /or registered o	Pic	
	NRAI Services, Inc.			<b>3</b>	
	515 East Park Avenue				
	P.O. B	ox NOT acceptable		_	
	**************************************			-	
as changed will				-	1t,
Such change was authorized by th	as authorized by resolution duly a ne board, or the corporation has be	dopted by its board of cen notified in writing	directors or by an of the change.	officer so	
1/10	1 Total		Catalano, Se		,
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not NVICES, INC.	ent and agree to act in il statutes relative to ti and accept the obliga to reflect a change in t	ne proper ana coi tion of my positio he registered offi	mplete n as registered	
while	harit	7/31/2012			
/ Sig	nature of Registered Agent		Date		
• -	half of an entity:				
	el-Asst. Secretary				

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