

File 0000003060

(Requestor's Name)

(Address)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

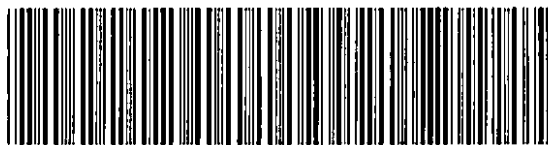
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OCT - 4 2024

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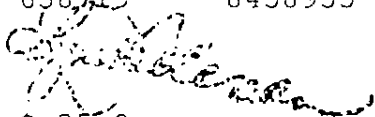


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FILED
2024 OCT -3 PM 12:19

RECEIVED
2024 OCT -3 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : 120000000195
REFERENCE : 658719 8458955
AUTHORIZATION : 
COST LIMIT : \$ 35.0

ORDER DATE : September 25, 2024
ORDER TIME : 12:35 PM
ORDER NO. : 658719-043
CUSTOMER NO: 8458955

CHANGE OF AGENT

NAME: NCC GROUP SECURITY SERVICES,
INC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

EXAMINER'S INITIALS: _____

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of NV in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NCC GROUP SECURITY SERVICES, INC
2. The principal office address: 650 California Street Suite 2950 San Francisco, CA 94108
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 07/11/2016 Document number: F16000003060
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
- LEGALINC CORPORATE SERVICES INC.
- 476 RIVERSIDE AVE.
- JACKSONVILLE, FL 32202

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee FL 32301

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

/s/James Jordan

James Jordan

President

Signature of an officer or director

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

By: Grace E. Kirby

Signature of Registered Agent

10/02/2024

Date

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

658719-43