## F22000003425

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	12/20/2022			
	Janelle Davis			
Reference #	1863999			
	:	SECURCOM INC.		
_	es of Incorporation/Autho	ization to Transact Business		
✓ Change of Agent				
Reinstatement				
☐ Conversion				
☐ Merger				
☐ Dissolution/Withdrawal				
☐ Fictitious Name				
Other				
	amount: <b>\$35.0</b> Janelle Dav			
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	12/20/2022		
	Janelle Davis		
Reference	#:1863999		
	ne: <b>SI</b>	ECURCOM INC.	
	cles of Incorporation/Authoriz		
☐ Am	endment		
✓ Change of Agent			
☐ Rei	nstatement		
Cor	nversion		
□ Ме	rger		
☐ Dis	solution/Withdrawal		
☐ Fict	titious Name		
☐ Oth	ner		
Authorized Signature:	d Amount:\$35.00		

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: SecurCom Inc.			
Name of Corporation			
DOCUMENT NUMBER: F22000003425			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter	ter to the following:		
John Novak			
Name of Contact Person	<del></del>		
SecurCom Inc.			
Firm/Company			
Floor 33, 11 Princess Grace Ave.			
Address	<del></del>		
Monte Carlo, Monaco 90000			
City/State and Zip Code			
jdonovan@PierceAtwood.com			
E-mail address: (to be used for future annual rep	ort notification)		
For further information concerning this matter, pleas	e call:		
Selena Moore, Paralegal, Pierce Atwood LLP	at (603 ) 373-2009 Area Code & Daytime Telephone Number		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Dep.	artment of State.		
Mailing Address: Amendment Section	Street Address: Amendment Section		

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327



## 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 Republic of the Marshall statement of change is submitted for a corporation organized under the laws of the States of Islands in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: \_\_\_\_\_SecurCom Inc. Floor 33, 11 Princess Grace Avenue, Monte Carlo, Monaco 90000 2. The principal office address 3. The mailing address (if different): 4. Date of incorporation/qualification:  $\underline{06/02/2022}$ F22000003425 Document number: 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) Wendy Swanson 146 Aragon Way, Suite 101 Jupitor, FL 33458 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Cogency Global Inc. 115 North Calhoun Street, Suite 4 P.O. Box NOT acceptable Tallahassee, FL 32301 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/ John Novak John Novak, 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 graph has been notified in writing of this change. 12/20/2022 Date Signature 6 | Registered Agent If signing on behalf of an entity: Colleen Humes, Assistant Secretary Typed or Printed Name

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