## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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	Fax Number : (850)878-5368		

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			

## LLC REGISTERED AGENT CHANGE SECURITY ALLIANCE, LLC

Certificate of Status	0
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Page Count	02
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or liability company submits the following statement agent, or both, in the State of Florida.	608.508, Florida Statutes, the undersigned limited in order to change its registered office or registered
1. Name of the limited liability company: Security A	Alliance, LLC
2. (a) Principal office address of limited liability co	Ompany: 8323 NW 12th St., Ste. 218   Doral FL 33126
(b) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	Doral FL 33126
6/12/2002	L02000014775 S
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho Registered Agent:	wn on the records of the Florida Dept. of State:  Corporate Creations Network Inc.
Registered Office Address:	11380 Prosperity Farms Road; #221E Co
	raini Beach Galuens, FL 33410
(b) Enter name of <u>NEW Registered Agent</u> and/ <u>NEW Registered Agent</u> :	or NEW Registered Office address:  CT Corporation System
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES	1200 South Pine Island Road
(Mear But Bokion STREET NOORLO	Plantation ,FL 33324
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the change of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability or operating agreement of the limited liability o	e, the Florida street address of the registered office to identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote of otherwise provided in the articles of organization or
Nichol McCroy Printed or typed name of signee	<del></del>
By: C Composition State of the Composition of the C	t and agree to act in this capacity. I further agree to the proper and complete performance of my duties, my position as registered agent as provided for in do merely reflect a change in the registered office ompany has been notified in writing of this change.  James M. Halpin
Signature of Registered Agent	Assistant Secretary
	Box 6327, Tallahassee, FL 32314 FEE: \$25.00

INHS18 (05/08)