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DIVISION OF CORPORATIONS
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COVER LETTER

Division of Corporations SUBJECT: Surveillance Equipment and Services, LLC (Name of Limited Liability Company) Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Peggy McCormick (Name of Person) Surveilx (Firm/Company) 11382 Prosperity Farms Rd., Suite G-229 (Address) Paim Beach Gardens, FL 33410 (City/State and Zip Code) For further information concerning this matter, please call: Peggy McCormick at (561 (Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ✓ \$25 Filing Fee \$55 Filing Fee & Certified Copy

INHS18 (8/05)

TO: , Registration Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limit	ed liability company is:	Surveillance Equipment and Ser	vices, LLC	
2. The mailing address of	of the limited liability co	ompany is: 11382 Prosperity I	Farms Rd., Suite G-229	
Palm Beach Gardens, Flor	ida 33410			
September 20, 2005		L05000092745		
3. Date of filing/registration in Florida		4. Document no	4. Document number	
5. The name of the regist Florida Department of		stered office address as show	n on the records of the	
•	Steven M. Chambe	rlain		
		Name		
	618 NE 1st Street	A 44	- · · · · · ·	
Address Gainesville, FL 32601				
		State and Zip	- FERN	
6. The name and address of the new registered agent and/or office: Peggy McCormick Name 11382 Prosperity Farms Rd., Suite G-229				
	Peggy McCormick		SE 3 C	
		Name	THE IS	
	11382 Prosperity Fan		92 3	
	Florida street address	s (P.O. Box NOT acceptable)	DOZ.	
	Palm Beach Garden	s _{FL} 33410		
	City, S	tate and Zip		
confirmed that after the cand the business office of liability company, it is he	hange or changes are me fithe registered agent we breby confirmed that the mited liability company of the limited liability		s of the registered office te of a Florida limited yed by an affirmative vote	
Peggy McCormick				
(Printed or typed name of signee			· · · · · · · · · · · · · · · · · · ·	
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm		gent and agree to act in this of to the proper and complete s of my position as registered iled to merely reflect a chang y company has been notified	capacity. I further agree to performance of my duties, I agent as provided for in se in the registered office in writing of this change.	
(Signature of Registered Agent)	O(mod)	 .		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00