

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000024277

FILED
Oct 09, 2009
Secretary of State

Entity Name: KMG SECURITY LLC

Current Principal Place of Business:

468 LISA KAREN CIR
APOPKA, FL 32712

New Principal Place of Business:

1052 ROYAL OAKS DRIVE
APOPKA, FL 32703

Current Mailing Address:

1631 ROCK SPRINGS RD
APOPKA, FL 32712

New Mailing Address:

FEI Number: 26-2117708 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KIDD, KRISTIC
468 LISA KAREN CIR
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

BARNLUND, KIMBERLY
1052 ROYAL OAKS DRIVE
APOPKA, FL 32703 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KIMBERLY BARNLUND

10/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: REED, KRISTI
Address: 1644 CALLIE CT
City-St-Zip: APOPKA, FL 32703

Title: MGR () Delete
Name: BARNLUND, KIMBERLY
Address: 1640 CALLIE CT
City-St-Zip: APOPKA, FL 32703

Title: MGR () Delete
Name: PIERRE, GARY
Address: 3163 CRESTWOOD CIR
City-St-Zip: ST CLOUD, FL 34769

Title: MGR (X) Delete
Name: ELGANI, MICHAEL
Address: 5697 TULIP AVE
City-St-Zip: ORLANDO, FL 32839

Title: MGR (X) Delete
Name: KIDD, KRISTIC
Address: 468 LISA KAREN CIR
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: BARNLUND, KIMBERLY
Address: 1052 ROYAL OAKS DRIVE
City-St-Zip: APOPKA, FL 32703

Title: MGR (X) Change () Addition
Name: PIERRE, GARY
Address: 136 LUCA LANE
City-St-Zip: KISSIMMEE, FL 34743

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KIMBERLY BARNLUND

MGR

10/09/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date