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RECESSIONARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
NOV 29 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D.A. Prevention LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter E Cassidy

Name of Person

D.A. Prevention LLC

Firm/Company

250 Ave. K S.W. Suite 100

Address

Winter Haven, FL 33880

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter E Cassidy

Name of Person

at (863) 508-1062

Area Code & Daytime Telephone Number

NOTARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

D.A. Prevention LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12-10-2008 and assigned
Florida document number LO 8000112727.

NOV 24 2011
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SHERIFF'S OFFICE
LAHASSEE, FLORIDA
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This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

PARK SECURITY LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

*250 Ave. K S.W. Suite 100
Winter Haven, FL 33880*

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

*250 Ave. K S.W. Suite 100
Winter Haven, FL 33880*

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Peter E Cassidy

New Registered Office Address:

250 Ave. K S.W. Suite 100

Enter Florida street address

Winter Haven, Florida 33880

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Peter E. Cassidy
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Michael Sumner</u>	<u>3917 S. Indian River Dr.</u> <u>Fort Pierce, FL 34982</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>Peter E Cassidy</u>	<u>250 Ave. K S.W. Suite 100</u> <u>Winter Haven, FL 33880</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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FLORIDA
PACIFIC
POWER
AND
LIGHT
COMPANY
REGISTRATION
AND
CHANGES
DEPARTMENT
FORT PIERCE, FLORIDA

Dated November 17, 2010.

Michael D. Sumner

Signature of a member or authorized representative of a member

Michael D. Sumner

Typed or printed name of signee

FILED

10 NOV 24 2010