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L. SELLERS

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**EXAMINER** 

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

## REGISTERED AGENT CHANGE PROPERTY SECUREMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

## 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.

Name of the limited liability company: PRO	PERTY SECUREMENT, LLC	
2. (a) Principal office address of limited liability company	y: 325 Clematis St	
(Note: MUST BE STREET ADDRESS)	Suite 348 West Palm Beach, FL 33401	
(b) Mailing address of limited liability company:	325 Clematis St	
(Note: MAY BE POST OFFICE BOX)	Suite 348 West Palm Beach, FL 33401	
1/9/2009	L09000002980	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	Robert Gomes	
Registered Office Address:	325 CLEMATIS ST, SUITE 348 WEST PALM BEACH , Florida 33401	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent: <u>NEW Registered Office Address:</u>	W Registered Office address:  Business Filings Incorporated  1203 Governors Square Blvd, Suite 101	
(MÜST BE FLORIDA STREET ADDRESS)	Tellahassee ,FL32301-2960	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member		
Robert Gomes, Member Printed or typed name of signee  I hereby accept the appointment as registered agent and a	To the second of	
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 filled 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.		
	ings Incorporated $\frac{72}{2}$	
Division of Corporations, P.O. Box 6327, Tallahassee, FI. 32314		

INHS18 (05/08)