

LD9000005609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

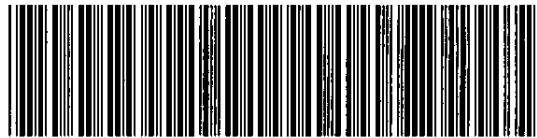
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 APR 20 AM 11:11

T. HAMPTON

APR 21 2009

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Strategic Security Consultants, 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:

Ricardo O. Rosario  
(Name of Person)

Strategic Security Consultants, LLC  
(Firm/Company)

2260 NE 37 Road  
(Address)

Homestead, FL 33033-5142  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ricardo O. Rosario at ( 786 ) 371-7305  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy  
*ROR*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

09 APR 20 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

April 10, 2009

RICARDO O ROSARIO  
2260 NE 37 RD  
HOMESTEAD, FL 33033-5142

SUBJECT: STRATEGIC SECURITY CONSULTANTS LLC  
Ref. Number: L09000005609

We have received your document for STRATEGIC SECURITY CONSULTANTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 109A00012190

**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. Name of the limited liability company: Strategic Security Consultants, LLC

2. (a) Principal office address of limited liability company: 15560 SW 72 Street  
(Note: **MUST BE STREET ADDRESS**) Miami, FL 33193

(b) Mailing address of limited liability company: 2260 NE 37 Road  
(Note: **MAY BE POST OFFICE BOX**) Homestead, FL 33033

January 20, 2009 L09000005609

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: Ricardo O. Rosario

Registered Office Address: 2260 NE 37 Road  
Homestead, FL 33033

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent: \_\_\_\_\_

**NEW** Registered Office Address: 15560 SW 72 Street  
(**MUST BE FLORIDA STREET ADDRESS**) Miami, FL 33033

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)

Ricardo O. Rosario  
(Printed or typed name of signer)

*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.*

\_\_\_\_\_  
(Signature of Registered Agent)

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