LM000035784

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
<u>, </u>		!		

Office Use Only



400241167214

11/01/12-01023-013

SECRETARY OF STATE
TALLAHASSEE FLORID

APPROVED AND FILED

D. BRUCE
NOV 0 2 2012
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ		Safety and Security Services, LLC me of Limited Liability Company		
Dear :	Sir or Madam:			
The e	nclosed Registered Agent/Regis	tered Office Change and fee(s) are submitted for filing.		
Please	e return all correspondence cond	erning this matter to the following:		
	Brian Avery			
	Name of Person			
	Event Safety and Security S Firm/Company	Services, LLC	SEC	
 -	1948 Durrand Ave	nue AHASS	NOV - I	APPR AI FIL
	Maitland, Florida 3	275`	SECRETARY OF STATE	APPROVED AND FILED
	City/State and Zip Code	さら	M 99	
E-	brian@eventsafetyserv	ces.com report notification)		
For fu	rther information concerning th	s matter, please call:		
	Brian Avery	at (321) 388-6987		
	Name of Person	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	S: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
	Enclosed is a check for the fe	llowing amount:		
İ	\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

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:Event S	afety and Security Sen	vices, LLC
2. (a) Principal office address of limited liability company	: 1948 Durrand Avenue	
(Note: MUST BE STREET ADDRESS)	Maitland, Florida 32751	
(b) Mailing address of limited liability company:	1948 Durrand Avenue	
(Note: MAY BE POST OFFICE BOX)	Maitland, Florida 32751	
04/13/2009	L0900003578	84
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dep	pt. State:
Registered Agent:	Brian Avery	<u> </u>
Registered Office Address:	1948 Durrand Avenue Maitland, Florida 32751	FILE(V - A) TARYON NASSEE.
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> :	W Registered Office address Matthew J. Brown, Esq.	STATE
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	C/O Mateer & Harbert, P. 225 East Robinson Street Orlando	t, Suite 600
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the regical. Or, in the case of a Flori was/were authorized by an a wise provided in the articles of	gistered office
Signature of a member or authorized representative of a member	-	
Brian Avery		
Printed or typed name of signee	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I per and complete performan sition as registered agent as p rely reflect a change in the re has been notified in writing	further agree to ce of my duties, provided for in gistered office of this change.
Signature of Registered Agent		

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