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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

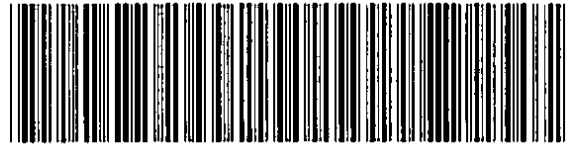
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2019 DEC 18 AM 8:18

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 23, 2020

SCOTT A MACDONALD
5077 FRUITVILLE ROAD #150
SARASOTA, FL 34232

SUBJECT: EXECUTIVE SECURITY SOLUTIONS LLC
Ref. Number: L11000077999

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file an annual report with our office. Therefore, the document you submitted cannot be filed until the entity is reinstated on our records. Please return to our website at www.sunbiz.org, click on 'Reinstatement' under the filing services menu and then follow the instructions.

Please return 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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 620A00001580

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXECUTIVE SECURITY SOLUTIONS 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:

SCOTT A MACDONALD

Name of Person

EXECUTIVE SECURITY SOLUTIONS LLC

Firm/Company

5077 FRUITVILLE RD #150

Address

SARASOTA, FL 34232

City/State and Zip Code

NOT APPLICABLE

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

For further information concerning this matter, please call:

SCOTT A MACDONALD

NOT APPLICABLE

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$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 605.0114 or 605.0116, 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: EXECUTIVE SECURITY SOLUTIONS LLC

2. (a) _____ Principal office address of limited liability company: (Note: <u>MUST BE STREET ADDRESS</u>) <u>5077 FRUITVILLE RD #150</u> <u>SARASOTA, FL 34232</u>	(b) _____ Mailing address of limited liability company: (Note: <u>MAY BE POST OFFICE BOX</u>) <u>5077 FRUITVILLE RD #150</u> <u>SARASOTA, FL 34232</u>
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3. <u>07/06/2011</u> Date of filing/registration in Florida	4. <u>L11000077999</u> Document number
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5. (a) NOTE: Check spelling of the word "Sarasota" for mailing and principal address
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
MACDONALD, SCOTT A

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
10414 OLD GROVE CIRCLE
BRADENTON, FL 34212

(b) NOTE: Please also update Authorized Persons Detail Address to new address

Enter name of NEW Registered Agent and/or NEW Registered Office address:

MACDONALD, SCOTT A
NEW Registered Office Address:
5077 FRUITVILLE RD #150
SARASOTA, FL 34232

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DIVISION OF CORPORATIONS
2019 DEC 18 AM 8:18

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.

Scott Allister MacDonald

Signature of a member or authorized representative of a member

SCOTT A MACDONALD

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 605, 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.

Scott Allister MacDonald

Signature of Registered Agent