

(Re	questor's Name)					
(Address)						
(Ac	ldress)					
(Ci	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Do	ocument Number	)				
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## **COVER LETTER**

Divi	sion of Corporations					
SUBJECT:	Innovative Surveillance, LLC					
	Name of Limited Liability Company					
Dear Sir or M	Madam:					
The enclosed	d Registered Agent/Registered Off	ice Change and f	cc(s) are submitted for filing.			
Please return	all correspondence concerning th	is matter to the fo	ollowing:			
John P Sil	is					
	Name of Person		_			
Innovative	Surveillance, LLC					
	Firm/Company		_			
2010 Adire	ondack Circle					
	Address		_			
Melbourne	FL 32935					
	City/State and Zip Code	<del></del>	-			
john@Nor	StopDVR.com					
E-mail	address: (to be used for future ann	ual report notific	ation)			
For further in	nformation concerning this matter,	please call:				
John P Šili	is	321	757 5310			
	Name of Person		Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS:						
_	gistration Section Registration Section					
	sion of Corporations	Division of Corporations				
	on Building	P.O. Box 6327				
	Executive Center Circle thassee, Florida 32301	Talia	shassee, Florida 32314			
" Encl	osed is a check for the following	amount:				
<b>12</b> \$2	25 Filing Fee	<b>□ \$</b> 55	Filing Fee & Certified Copy			

SEGRETARY OF SHALL TALLAHASSEE, FLORID

TO:

Registration Section

## 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.	Na	me of the limited liability company: Innovative St	urveilla	nce, l	LLC			
2 4	a)	2010 Adirondack Circle		, 20	10 Ad	irondack Circle		
2. (a)		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(	Mailing address of limited liability company:  (Nate: MAY BE POST OFFICE BOX)				
		Melbourne FL 32935		Me	lbourr	ne FL 32935		
		7/16/2013		L13	00010	0927		
3.		Date of filing/registration in Florida	4.			Document number		
5.	(a)	Corporation Service Company						
	()	Registered Agent and Registered Office shown on the records of	the Florid	a Dept.	of State	:	٠ه	F's
		Corporation Service Company					ੋੜੋਂ, ਜ਼ਵ	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						至一
		1201 Hays Street					4	SSE
		Tallahassee , FI	32301				P	ESS.
	(b)	John P Silis					r: -55	器
,	(U)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office at	idress:	<del></del>			324
		2010 Adirondack Circle						
		NEW Registered Office Address:			·····			
		Melbourne	32935		<del></del>			
the age was the Si I hi pro the to not	cha nt w /we arti gnat erel visi obli nere ifiec	mited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited library authorized by an affirmative vote of the members of organization of the operating agreement of the unit of a member or authorized representative of a member by accept the appointment as registered agent and agons of all statutes relative to the proper and complete igations of my position as registered agent as provide light reflect a change in the registered office address, I in writing of this change.	f the reginability confithe limited  Jol  ree to accompany and for in	stered ompar nited I liabili nn P	office ny, it is iability ty com Silis is capa of my d er 605.	and the business offic hereby confirmed that company or as otherwpany.  Printed or typed name of society. I further agree to tuties, and I am familia F.S. Or, if this documents of the society of the society.	te of the it the charvise provenium to comply ar with an anent is be	registered rige(s) rided in  with the rid accept ring filed