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(Re	questor's Name)			
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(Cit	ty/State/Zip/Phone	e #)		
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☐ PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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ALLAHASSE PESTATE
ALLAHASSE PESTATE

## COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	Security Alliance Holdings, LLC		
	Name of 1	Limited Liab	ility Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Office C	hange and fe	e(s) are submitted for filing.
Please	return all correspondence concerning this ma	tter to the fo	llowing:
Greg	ory Murphy		
	Name of Person	<u></u>	
Secu	rity Alliance Holdings, LLC		
	Firm/Company		-
8323	N W 12th Street Suite 218		
	Address		•
Dora	ıl, Florida 33126		
	Clty/State and Zip Code		-
gregi	m@securityalliancegroup.com		
ेन्प	E-mail address: (to be used for future annual r	eport notific	ation)
For fu	rther information concerning this matter, plea	se call:	
Willia	am Murphy	305	670-6544
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAI	LING ADDRESS:
	Registration Section		stration Section
	Division of Corporations		sion of Corporations
	Clifton Building		Box 6327
	2661 Executive Center Circle Tallahassee, Florida 32301	Talls	shassee, Florida 32314
	Enclosed is a check for the following amo	ount:	
	2 \$25 Filing Fee	Q \$55	Filing Fee & Certified Copy
INHSI	8 (2/14)		

## 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.

	(b)	8323 NW	12th Street Ste 218
Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y:		niling address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Doral, FL 33126	<del></del> .	Doral, FL	33126
10-25-16		.1600019	5640
Date of filing/registration in Florida	4.	I	Document number
Russell Divine			
Registered Agent and Registered Office shown on the recor	rds of the Florida	Dept. of State:	
24 South Orange Ave			
Registered Office Address (MUST BE FLORIDA STR	EET ADDRESS)		
Orlando	, FL 32801		
	_, FL		Į. Į.
Enter name of NEW Registered Agent and/or NEW Regi	stered Office add	LESS:	<del>至</del> 企
0			4SA
Gregory Murphy	<del></del>		E C
NEW Registered Office Address:			1.00 1.00
8323 NW 12th Street, Ste 218			C 0-1
Domi	20426		老法
Doral	_, <sub>FL</sub> _33126		3-

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

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