Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 Phone

: (702)866-2500

Fax Number

: (702)866-2689

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LLC REGISTERED AGENT CHANGE INTEGRATED SECURITY AND COMMUNICATIONS OF **NEW JERSEY**

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COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: Integrate	ed Security & Commi	unications Of	New Jersey, LLC		
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registere	J Agent/Registered Offic	ee Change and f	ee(s) are submitted for filing.		
Please return all corresp	ondence concerning this	matter to the fo	ollowing:		
Joanna Fernandez			· 1		
oddinia i ciriandez	Name of Person	- \	_		
InCorp Services, In			_		
	Firm/Company				
3773 Howard Hugh	ies Parkway Suite 50 Address	00S	_		
Las Vegas, NV 891 Ci	69-6014 y/State and Zip Code		_		
Managedreports@i E-mail address: (t	ncorp.com o be used for future annu	al report notific	eation)		
	concerning this matter, I				
Joanna Fernandedz for li	Corp Services, Inc.	at (800) 246-2677		
	of Person		Area Code & Daytime Telephone Number		
Mailing Addr Registration S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a	theck for the following	amount:			
별 \$25 Filing F	ee	□ \$5	5 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.

Principal office address of limited liability con (Note: MUST BE STREET ADDRESS Millstone Township, NJ 08535		_ (b)		ike Drive		
(Note: MUST BE STREET ADDRES.		_ (,		Anillian addamen		
Millstone Township, NJ 08535					of limited liability co BE POST OFFICE	
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01/02/2018		_	L	_18000000	699	
Date of filing/registration in Florid	a	4.		Document no	umber	
KRISTENSEN, ROBERT						
2885 LANDYNS CIRCLE			Dept of State	::		
FERNANDINA BEACH	, FL	32034	1		2020 SEC TALL	
InCorp Services, Inc.					OCT CKET	Ti
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	Registered C	Office add	ress:		- ७ १८८१	1
17888 67th Court North					AR S	
NEW Registered Office Address:					3: 30 TATE ORIDA	
Loxahatchee	, FL_	33470)			
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nure of a member or authorized representative of a mem	nber			Printed or type	d name of signee	
ons of all statutes relative to the proper and igations of my position as registered agent a fly reflect a change in the registered office a lin writing of this change f	complete p s provided ddress, I hë	erforma for in C ereby co	nce of my (hapter 505 nfirm that	duties, and Fi . F.S. Or, if i the limited lid	am jamutar wun this document is ability company :	ly with the and accept being filed has been
	Registered Agent and Registered Office shown on the 2885 LANDYNS CIRCLE Registered Office Address (MUST BE FLORIDA) FERNANDINA BEACH InCorp Services, Inc. Enter name of NEW Registered Agent and/or NEW 17888 67th Court North NEW Registered Office Address: Loxahatchee imited liability company is not organized unange or changes are made, the Florida street avill be identical. Or, in the case of a Florida ere authorized by an affirmative vote of the release of organization or the operating agreement of the appointment as registered agent of the proper and inations of my position as registered agent and the reflect a claringe in the registered office at I in writing of this change!	Registered Agent and Registered Office shown on the records of the 2885 LANDYNS CIRCLE Registered Office Address (MUST BE FLORIDA STREET AI) FERNANDINA BEACH ,FL InCorp Services, Inc. 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Enter name of NEW Registered Agent and/or NEW Registered Office address: 17888 67th Court North NEW Registered Office Address: Loxahatchee ,FL 33470 imited liability company is not organized under the laws of the State of Florida, it is her nige or changes are made, the Florida street address of the registered office and the busivill be identical. Or, in the case of a Florida limited liability company, It is hereby confere authorized by an affirmative vote of the members of the limited liability company or cless of organization or the operating agreement of the limited liability company. Michael Thom. Printed or type to accept the appointment as registered agent and agree to act in this capacity. I further one of a member of authorized representative of a member of the proper and complete performance of my duties, and i gations of my position as registered agent as provided for in Chapter 305, F.S. 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I further agree to compose of the proper and complete performance of my duties, and I am familiar with igations of my position as registered agent as provided for in Chapter 805, F.S. Or, if this document is divergled a charge in the registered agent as provided for in Chapter 805, F.S. Or, if this document is fin writing aghts change. Joanna Fernandez on behalf of InCorp Services, Inc.