

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L99000008045

FILED
Oct 05, 2007
Secretary of State

Entity Name: CERTIFIED SECURITY SYSTEMS, LLC

Current Principal Place of Business:

9456 PHILLIPS HIGHWAY, SUITE 7
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

9456 PHILLIPS HIGHWAY, SUITE 7
JACKSONVILLE, FL 32256

New Mailing Address:

10365 HOOD RD. S. 209
JACKSONVILLE, FL 32257

FEI Number: 59-3609917 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

STONEBURNER, GRESHAM R
841 PRUDENTIAL DRIVE
SUITE 1400
JACKSONVILLE, FL 32207 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GRESHAM STONEBURNER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: HASSAN, JOE
Address: 9456 PHILLIPS HIGHWAY, SUITE 7
City-St-Zip: JACKSONVILLE, FL 32256

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Delete
Name: SHERIDAN, JOHN
Address: 2700 WEST CYPRESS CREEK ROAD C100
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOE HASSAN

MGR

10/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date