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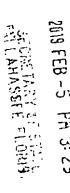
(Re	questor's Name)			
(Address)				
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(Cit	ry/State/Zip/Phone	#)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Katie Boese katie.thomas@cscglobal.com

Date: February 1, 2019

Order#: 604136-007

Re: CENTURY FIRE PROTECTION, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Katie Thomas c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## RTEMENT 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. N	ame of the limited liability company: CENTURY FIRE	PROTE	CTION, LLC
2 (a)	4155 St. John's Parkway Suite 1100	(b)	4155 St. John's Parkway Suite 1100
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (8)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Sanford, FL 32771		Sanford, FL 32771
	December 22, 2006		M0600007096
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T Corporation System		
J. (u)	Registered Agent and Registered Office shown on the records of t	he Florida I	Dept. of State:
	1200 South Pine Island Road		. 2
	1200 South Pine Island Road  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	Plantation .FL	33324	Control of the contro
; (b)	Corporation Service Company		<u> </u>
()	Enter name of NEW Registered Agent and/or NEW Registered	Office addr	<u>m</u>
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassee , FL	32301	
the cha agent was/w the art	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the Richard Deeb	the registed bility con fithe limited lia	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
Signa	ture of a member or authorized representative of a member	<u></u>	Printed or typed name of signee
provis the ob- to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. It is a change of this change.  The of Registered Agent Corporation Service Company	performai I for in Cl iereby cor	n this capacity. I further agree to comply with the nee of my duties, and I am familiar with and accept napter 605, F.S. Or, if this document is being filed after that the limited liability company has been nee E. Kirby, Asst. Vice President

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