

MD8000002609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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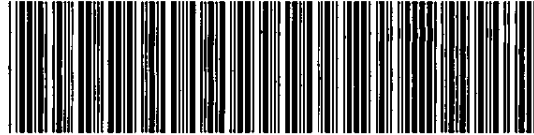
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DEC 16 2009

**EXAMINER**

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Homebridge Security, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Warren Rustin

Name of Person

Homebridge Security, LLC

Firm/Company

2200 SW 10th Street

Address

Deerfield Beach, FL 33442

City/State and Zip Code

warrenr@modernadmedia.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Warren Rustin

Name of Person

at ( 954 )

312-4706

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 5, 2009

WARREN RUSTIN  
2200 SW 10TH STREET  
DEERFIELD BEACH, FL 33442

SUBJECT: HOMEBRIDGE SECURITY, LLC  
Ref. Number: M08000002609

We have received your document for HOMEBRIDGE SECURITY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LLC, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

There is a balance due of \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 109A00034719

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: Homebridge Security, LLC

2. (a) Principal office address of limited liability company: 2200 SW 10th Street

☒ (Note: **MUST BE STREET ADDRESS**) Deerfield Beach, FL 33442

(b) Mailing address of limited liability company: 2200 SW 10th Street

☒ (Note: **MAY BE POST OFFICE BOX**) Deerfield Beach, FL 33442

6/3/08  
3. Date of filing/registration in Florida

M08000002609  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Warren Rustin

Registered Office Address: 6420 Congress Avenue  
Suite 1800  
Boca Raton, FL 33487

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent: BDB Agent Co.

**NEW** Registered Office Address: 5355 Town Center Road  
(MUST BE FLORIDA STREET ADDRESS) Suite 900  
Boca Raton, FL 33486

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Warren Rustin  
Signature of a member or authorized representative of a member

Warren Rustin  
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: Warren Rustin Assistant Secretary  
Signature of Registered Agent

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

FILED  
9 DEC 15 AM 8:00  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE