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SECRETARY OF STATE

D. BRUCE

MAY 0 5 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporation	ons			
SUBJECT:	GMR Security (Name of Lin		bility Company)	
Dear Sir or Madam:				
The enclosed Registered Age	nt/Registered Office	Change	and fee(s) are submitted	for filing.
Please return all corresponde	nce concerning this r	matter to	the following:	
Robert Matt	uchio		_	
(Name o	f Person)			
GMR Secu			_	TAS O
(Firm/Co	mpany)			9 MA ECRE
6410 Indigo	Forest		_	TARY OF HASSEE, F
(Addr	ess)			म इस्
San Antonio	o, TX 78239			2: t
(City/State and Zip Code)		_	DM O	
For further information conce	erning this matter, pl	ease call:		
Robert Mattuchio	at (210) 737-4887	
(Name of Pers	on)	(Area C	Code & Daytime Telepho	one Number)
STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, Florida 32	ns Circle	Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations Box 6327 ahassee, Florida 32314	
Enclosed is a check	for the following am	ount:		
✓ \$25 Filing Fee		□ \$5	5 Filing Fee & Certified	Сору

INHS18 (5/08)

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.	Nar	ne of the limited liability company:	GMR Security, LLC
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	6410 Indigo Forest San Antonio, TX 78239
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	6410 Indigo Forest San Antonio, TX 78239
_		e 24, 2008 e of filing/registration in Florida	M08000003030 Document number
Э.	Dai	e of filling/registration in Florida	. Document number
5.	(a)	Registered Agent and Registered Office shown on the	· 20 6
		Registered Agent:	Kelly Masquida
		Registered Office Address:	471 Apollo Drive Juno Beach, FL 33408
	(b)	/ Registered Office address:	
		NEW Registered Office Address:	4910 NW 52nd CT.
(MUST BE FLORIDA STREET ADDRESS)		(MUST BE FLORIDA STREET ADDRESS)	
tha off he lia lin	at affice of the contract of t	imited liability company is not organized under the later the change or changes are made, the Florida street of the registered agent will be identical. Or, in the care confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company. Later the change of a member or authorized representative of a member)	address of the registered office and the business se of a Florida limited liability company, it is
_			
		Mattuchio or typed name of signee)	
I i co. an F.S co.	here mply s fan S. O nfirn	by accept the appointment as registered agent and ag with the provisions of all statutes relative to the pro- niliar with and accept the obligations of my position of the properties of the property reflect a cl n that the himited liability company has been notified	ree to act in this capacity. I further agree to per and complete performance of my duties, and I ps registered agent as provided for in Chapter 608, pange in the registered office address, I hereby in writing of this change.
(Si	gnatu	re of Registered Agent)	
/		Dill to d non	(205 /D II I DI 2024 A

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