

M1100000/204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

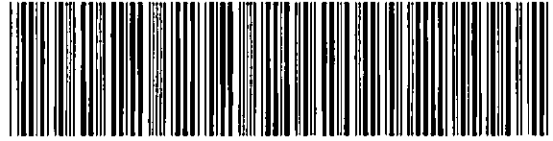
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA


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2022 JAN 18 AM 10:02

SECRETARY OF STATE
TALLAHASSEE, FL

JAN 19 2022

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 342516 156084A
AUTHORIZATION : 
COST LIMIT : \$25.00

ORDER DATE : December 21, 2021
ORDER TIME : 10:45 AM
ORDER NO. : 342516-014
CUSTOMER NO: 156084A

CHANGE OF AGENT

NAME: ALLIED SECURITY HOLDINGS LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS: _____

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.

1. Name of the limited liability company: ALLIED SECURITY HOLDINGS LLC

2. (a) 161 Washington St. (b) 161 Washington St.
 Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) *(Note: MAY BE POST OFFICE BOX)*

Suite 600 Suite 600
Conshohocken, PA 19428 Conshohocken, PA 19428

3. 03/04/2011 4. M11000001204
 Date of filing/registration in Florida Document number

5. (a) CT CORPORATION SYSTEM
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1200 SOUTH PINE ISLAND ROAD
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

PLANTATION, FL 33324

(b) Corporation Service Company
 Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address:
1201 Hays Street
Tallahassee, FL 32301

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 TALLAHASSEE, FL

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.

Jill E. Cilmi Jill Cilmi, Authorized Person
 Signature of a member or authorized representative of a member 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 605, 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.

Grace E. Kirby
 Signature of Registered Agent

Grace E. Kirby, Asst. Vice President of Corporation Service Company
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00