## M1200000566

(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
Certified Copies	_ Certificates o	of Status			
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JAN 1 1 . . .

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195						
REFERENCE : 342517 156084A						
AUTHORIZATION :						
COST LIMIT : (\$25.00						
ORDER DATE : December 21, 2021						
ORDER TIME : 10:29 AM						
ORDER NO. : 342517-258						
CUSTOMER NO: 156084A						
CHANGE OF AGENT						
NAME: UNIVERSAL PROTECTION SERVICE, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Alexxis Weiland						
CONTROL I BROOM. ATCANTS WELLERING						

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.

2. (a)	1551 N. Tustin Avenue		(b)	1551 N	. Tustin Avenue
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	#650			#650	
	Santa Ana. CA 92705	_		Santa A	na, CA 92705
	01/30/2012		٨	1120000	000566
3.	Date of filing/registration in Florida	4,			Document number
5. (a)	CT CORPORATION SYSTEM				
J. (u)	Registered Agent and Registered Office shown on the records of	the Flor	rida I	Pept. of St	tate:
	1200 SOUTH PINE ISLAND ROAD				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	ESS)		2027 J
	PLANTATION	3332	4		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company		2022 JAN 18 AM 10: 27 SECKLARASSEE FL		
	NEW Registered Office Address:				<u> </u>
	1201 Hays Street				<del></del>
	Tallahassee F	L3230	1		
change agent v was/we the arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited leaves authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registe lability of the l limite	ered com imit d lia	office a pany, it ed liabil bility co	ind the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
Signa	ture of a member br authorized representative of a member		01	ain, Auti	Printed or typed name of signee
l here provisi the obl to mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.	ree to a perfor ed for in hereby	ict ir man i Ch con	this ca ce of my apter 60 firm tha	
	Zhace Z-Kuby re of Registered Agent				

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

INHS18 (2/14)

Grace E. Kirby, Asst, Vice President of Corporation Service Company