7/21/2017

Division of Corporations



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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TYCO INTEGRATED SECURITY LLC

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION 1 (1-4 must be completed)

1. Name of limited liability Company as it appear	s on the records of the Florida Department of	
State: Tyco Integrated Security LLC		<u>. </u>
Enter new principal office address, if applicable:	4700 Exchange Court, Suite 300	
(Principal office address	Boca Raton, FL 33431	•••••
MUST BE A STREET ADDRESS)		A.C.
Enter new mailing address, if applicable:	Same as above	1012
(<u>Mailing address</u> MAY BE A POST OFFICE BOX)		SS.
701. DD 71. DD 71. P. DD 71. P. DD 71. DD 71		2
2. The Florida document number of this limited lin	ability company is: M12000003949	9: 02
3. Jurisdiction of its organization: Delaware		<u> </u>
4. Date authorized to do business in Florida: July	12, 2012	
SECTION II (5-9 complete only the applicable	changes)	
5. New name of the limited liability company: Jo (mus	ohnson Controls Security Solutions LLC st contain "Limited Liability Company, " "L.L.	.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.C.	naging members adopting the alternate name.	orida and attach a The alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office as	ed officer address on our records. <u>enter the na</u> ddress here:	me of the new
Name of New Registered Agent: No Change		
New Registered Office Address:	Emer Florida Street Addre	oce
	Pr M.	
-	, Florida	Zip Code
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the	ent and agree to act in this capacity. I further a r and complete performance of my duties, and tered agent as provided for in Chapter 605, F e in the registered office address, I hereby con	Tam familiar with S. Or, if this
——————————————————————————————————————	Changing Registered Agent, Signature of New	Registered Agent

 If the amendment changes person, title or capacity in accordance with 605,0902 (1)(c), indicate that change: 						
itle/ Capacity	Name	Address	Type of Action			
Manager	Joseph R. Oliveri	500 Bi County Blvd, 470, Farm	ningdsle, NY			
		Daniel McGrath	X Remove			
lanager	Anthony McGraw	4700 Exchange Court, Boca Ra	4700 Exchange Court, Boca Raton, FL 33431			
		Bob Roche	Remov			
		<u> </u>				
			Remove			
			Add			
			Remove			
			Add			
aforemention	a certificate, if required; no more ned amendment(s), duly authentiunder the law of which this entity	e than 90 days old, evidencing the icated by the official having custody of recy is organized. Me the authorized representative	Remove SECTION ASSETS			
	Anthony McGraw, Ma	anaver				

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'TYCO INTEGRATED SECURITY LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'JOHNSON CONTROLS SECURITY SOLUTIONS LLC' ON THE THIRTEENTH DAY OF JUNE, A.D. 2017, AT 6:29 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



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Date: 06-23-17

2175945 8320 SR# 20174897843

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