M14000000982

(R	equestor's Name)				
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(Document Number)					
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SECRETARY OF STATE
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MAR 2 4 2013 T. **HAMPTON**

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MG Security Services, LLC Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tissell Cuerus Name of Person
MG Security Services, LLC Firm/Company
133 West 25th Street Suite &W Address
New York M 10001 City/State and Zip Code
Jensey & messeurity Services. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Smell Curas at (212) 242-4477 Name of Person Area Code & Daytime Telephone Numb
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
□ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

INHS18 (2/14)



March 3, 2014

LISSELL CUERAS MG SECURITY SERVICES LLC 133 W 25TH ST - STE 8W NEW YORK, NY 10001

SUBJECT: MG SECURITY SERVICES LLC

Ref. Number: M14000000989

We have received your document for MG SECURITY SERVICES 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):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Letter Number: 514A00004617

Tammy Hampton Regulatory Specialist III

www.sunbiz.org

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. N	Name of the limited liability company: MG Sec	vity	Ser	vias, LLC		
2. (a)	Principal office address of limited liability company:	_ (b)	133	Mailing address of lir		
	(Note: MUST BE STREET ADDRESS)			-	<u>POST OFFICE BOX</u>	•
	New York, My 10001	_	New	york my	10001	
2	2-10-2014	-	M14	OOOOO9	89	
3.	Date of filing/registration in Florida	4.		Document numb	er	
5. (a) <u>Carlos Rodriguez</u>					
	Registered Agent and Registered office shown on the records of th		•	ate:		
	2705 Shaughnessy Dune Registered Office Address (MUST BE FLORIDA STREET A)			_		
	Registered Office Address	<u>)DKESS)</u>				
	wellington ,FL	331			2014 HAR 21 SECRETARY TALLAHASSE	
	wellington, FL	<u> </u>	17		IN HAR 21 ECRETAR	
(b	Manuel Gonez				21 ASS	
	Enter name of NEW Registered Agent and/or NEW Registered O	ffice add	ress:	_		П
						U
	2705 Shaughnessy Drine NEW Registered Office Address:				2: 4.6	
	NEW Registered Office Address:				DI	
				<u> </u>		
		20.4				
	- ruelling ton , FL_	<u> 334</u>	14 —			
the chagent was/y	limited liability company is not organized under the laws nange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liab were authorized by an affirmative vote of the members of	he regist pility cor the limit	ered offic npany, it ted liabili	ce and the business is hereby confirmed ity company or as of	s office of the reg	istered e(s)
	ticles of organization or the operating agreement of the li		•		•	
Sind	ature of a member or authorized representative of a member		Mar	Printed or typed nai	nez	
		a ta aat i	in this sa		_	ish shoo
provi: the old to me notific	eby accept the appointment as registered agent and agree sions of all statutes relative to the proper and complete p bligations of my position as registered agent as provided rely reflect a change in the registered office address, I he ed in writing of this change,	? 10 act i ?rformai for in Ci reby coi	n inis ca nce of my hapter 60 nfirm tha	pacity. I further as y duties, and I am f 15, F.S. Or, if this at the limited liabili	gree to comply w. amiliar with and document is bein ity company has b	ith the accept g filed seen
	ure of Registered Agent					