

71600000 4232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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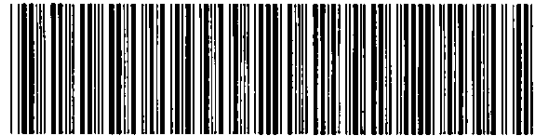
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** National Association of Security Officers Inc  
Name of Corporation

**DOCUMENT NUMBER:** N16000004232

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ceresia Smith

Name of Contact Person

C & B Financial Services Corp

Firm/Company

7971 Riviera Blvd, Suite 304

Address

Miramar, FL 33023

City/State and Zip Code

cbtaxes@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gabriel Deutsch

Name of Contact Person

at ( 305 ) 770-0033

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: National Association of Security Officers Inc
2. The principal office address: 633 NE 167th Street # 1001  
North Miami Beach, FL 33162
3. The mailing address (if different): same
4. Date of incorporation/qualification: 04/26/2016 Document number: N16000004232

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C & B Financial Services Corp

7971 Riviera Blvd, Suite 304

Miramar, FL 33023

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Gabriel Deutsch

633 NE 167th Street # 1001

P.O. Box NOT acceptable

North Miami Beach, FL 33162

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Gabriel Deutsch  
Signature of an officer or director

Gabriel Deutsch, Owner  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Gabriel Deutsch  
Signature of Registered Agent

6/22/17  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*