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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVEU AND FILFO

R. A. Sharel

C. Coultiette NOV 0 7 2007

## **COVER LETTER**

то:	TO: Amendment Section Division of Corporations		
SUBJI	ECT: National Consulting & Security Asso	ociates, Inc.	
DOCL	JMENT NUMBER: P01000036045		
The en	nclosed Statement of Change of Registered Office/Ap	gent and fee are submitted for filing.	
Please	return all correspondence concerning this matter to	the following:	
	Hector Garcia	4 Powers	
	(Name of Contac	t rerson)	
	National Consulting & Security As (Firm/Comp.		
	PO Box 12111 (Address	<del>)</del>	
	Las Vegas, NV 89112 (City/State and Z	ip Code)	
For fur	rther information concerning this matter, please call:		
Hector	r Garcia a (Name of Contact Person)	t ( 702 ) 428-5611 (Area Code & Daytime Telephone Number)	
Enclos	sed is a \$35.00 check made payable to the Departmen	nt 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

statement of change is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.
The name of the corporation: National Consult	ting & Security Associates, Inc.
2. The principal office address: PO Box 12111, L	.as Vegas, NV 89112
3. The mailing address (if different): N/A	
4. Date of incorporation/qualification: 04/10/200	Document number: P01000036045
5. The name and street address of the current regineration Department of State:	istered agent and registered office on file with the
Todd Dockswell	
526 Cypress Circle	
Tequesta, FI 33469	
<ol><li>The name and street address of the new registe (if changed):</li></ol>	
Hector Garcia	NOV -5 P
2241 SW 20 Street	SEY P
(P.O. Box NOT	acceptable)
Miami, FI 33145	
The street address of its registered office and thas changed will be identical.	ne street address of the business office of its registered agent,
Such change was authorized by resolution duly authorized by the board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
(Signature of an officer or director)	Hector Garcia, President (Printed or typed name and title)
I hereby account the appointment as registered a	agent and agree to act in this capacity, f all statutes relative to the proper and complete performance t the obligation of my position as registered agent. Or, if this see in the registered office address. I hereby confirm that the
All	October 26, 2007
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	_

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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