

PS000016328

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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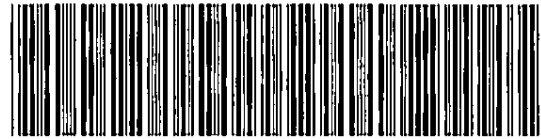
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/20/18--01001--000 **35.00

FILED
2018 NOV 20 P 6 25
TALLAHASSEE, FLA

10/21

PHC

ISPHORDING, BECHTOLD & SHARRER, P.A.

ATTORNEYS & COUNSELORS AT LAW

9

Daniel A. Bechtold (1959-2014)
Braden H. Sharrer

OF COUNSEL

Roger O. Isphording+*
Clifton F. White
Charles F. Wheeler
Robert L. Williams

+Board Certified in Wills Trusts and Estates

*Fellow American College of Trust and Estate Counsel

November 15, 2018

Reply to Venice office
Direct dial 941-488-7751

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

ATTENTION: Filing Department

Dear Sir/Madam:

Enclosed please find the following for recording:

1. Statement of Change of Registered Office or Registered Agent of Both for Corporations for Fidelis Security Solutions, Inc.

Our check in the amount of \$35.00 is also enclosed to cover the filing fee.

Thank you for your attention to this matter.

Sincerely,



Brady Sharrer
For the Firm

BS/jf

Enclosures

cc: Richard T. Kerkerling, Fidelis Security Solutions, Inc.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Fidelis Security Solutions, Inc.
Name of Corporation

DOCUMENT NUMBER: P05000163284

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:

Richard T. Kerkering

Name of Contact Person

Fidelis Security Solutions, Inc.

Firm/Company

105 Hills Road

Address

Nokomis, Florida 34275

City/State and Zip Code

rtkerkering@hotmail.com

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

For further information concerning this matter, please call:

Braden Sharrer

Name of Contact Person

at (941) 488-7751

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: Fidelis Security Solutions, Inc.
2. The principal office address: 105 Hills Road, Nokomis, Florida 34275

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/14/2005 Document number: P05000163284

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)

Daniel A. Bechtold (deceased)

240 Nokomis Avenue South, Suite 200

Venice, Florida 34285

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

Braden Sharrer

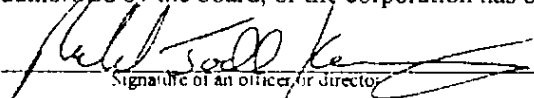
240 Nokomis Avenue South, Suite 200

P.O. Box NOT acceptable

Venice, Florida 34285


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.


Signature of an officer or director

Richard Todd Kerkeny Director
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.


Signature of Registered Agent

11/15/18
Date

If signing on behalf of an entity:

Braden Sharrer
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 (03/12)