

PD6000127805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
OF CALIFORNIA

C. Lewis
Feb 6-14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EBS SECURITY INC.
Name of Corporation

DOCUMENT NUMBER: P06000127805

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:

PRINTELLA BANKHEAD

Name of Contact Person

EBS SECURITY INC.

Firm/Company

220 EAST FORSYTH STREET SUITE C

Address

JACKSONVILLE, FLORIDA 32202

City/State and Zip Code

ebssecurity@bellsouth.net

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

For further information concerning this matter, please call:

PRINTELLA BANKHEAD at **904 766-8330**

Name of Contact Person

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: EBS SECURITY INC.
2. The principal office address: 220 EAST FORSYTH STREET SUITE C
JACKSONVILLE, FLORIDA 32202
3. The mailing address (if different): P. O. BOX 9733
JACKSONVILLE, FL 32208
4. Date of incorporation/qualification: OCTOBER 06, 2006 Document number: P06000127805
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)

PRINTELLA BANKHEAD

1400 SECRETARIAT LN. S.

JACKSONVILLE, FL 32218

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

Printella Bankhead

220 EAST FORSYTH STREET SUITE C

P.O. Box NOT acceptable

JACKSONVILLE, FLORIDA 32202

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

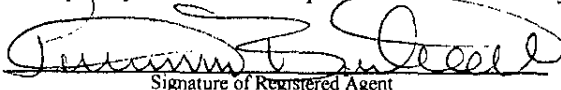
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

PRINTELLA BANKHEAD, PRESIDENT

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

01/02/2013
Date

If signing on behalf of an entity:

PRINTELLA BANKHEAD

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)

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