PO8 0000 22282

(Re	questor's Name)	
(Ad	dress)	<u></u>
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	ed Copies Certificates of Status	
Special Instructions to	Filing Officer:	





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AUG 1 9 2015 C. CARROTHERS

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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2015

OLGA VALDES 1530 NW 15 TERRACE HOMESTEAD, FL 33030

SUBJECT: V SECURITY SERIVCES, INC.

Ref. Number: P08000022282

We have received your document for V SECURITY SERIVCES, INC.. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$35.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The attached form must be completed in order to file the document. .

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) 245-6050.

Cathy A Carrothers Regulatory Specialist

Letter Number: 815A00016536

www.sunbiz.org

TO:

Amendment Section

DOCUMENT NUMBER:

COVER LETTER

PO8000022282

DIAISIC	m of Cor	poramons		
SUBJECT:	<i>V</i> .	Security Na	Services me of Corporation	Inc.

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:

	Olga Valdes Name of Contact Person
	Name of Contact Person
	V. Security Services, Inc.
	1530 NW 15 Terrace
-	Address
-	Homes Tead, FL 33030
	City/State and Zip Code
	V. Secur. Services Ramail - com
-	F-mail address: Ita he used for fitting annual report additiontion

For further information concerning this matter, please call:

Value of Contact Person at (786) 3/2 - 9855

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

8136812054

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

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: \(\sum_{\text{Security}} \sum_{\text{ev} \text{Vices}}, \overline{Time.}
2. The principal office address: 1530 NW 15 Torrace
Hamestead, FL 33030
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/77/2009 Document number: POBODOO 2228
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)
12748 SW 266 Terrace
Miami, FL 33032
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
1530 1/U/ 15 Terrace
P.O. Box NOT exceptable Homestedd, FL 33030
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.
X Signature of an outlier of director Olga Valles President Printed or typen cause 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 aggument 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.
× 08/10/2015
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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