

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-0821
Fax Number : (850) 558-1515

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.****

Email Address: _____

REGISTERED AGENT CHANGE
SKY SECURITY SERVICES FLORIDA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

2012 JUL 18 AM 8:03

TO: DIVISION OF CORPORATIONS
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STATE
TALLAHASSEE FLORIDA

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JUL 19 2012

T. ROBERTS

**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: SKY SECURITY SERVICES FLORIDA, INC.
2. The principal office address: 5401 Kirkman Road, Suite 306, Orlando, FL 32819
3. The mailing address (if different): 515 South Flower, Burbank, CA 91502
4. Date of incorporation/qualification: 06/25/2009 Document number: P09000055119
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Incorp Services, Inc.
17888 67th Court North
Loxahatchee, FL 33470
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporation Service Company
1201 Hays Street
(P.O. Box NOT acceptable)
Tallahassee, FL 32301

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.

Maureen Cathell
(Signature of an officer or director)

Maureen Cathell, Vice 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.

Corporation Service Company
By: Grace E. Kirby
(Signature of Registered Agent)

July 13, 2012

(Date)

If signing on behalf of an entity:

Grace E. Kirby, Assistant VP
(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)

FILED
JUL 18 2012
TALLAHASSEE, FLORIDA
SECRETARY OF STATE