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PICK-UP	☐ WAIT	☐ MAIL
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(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Home Link Armor Corporation

Name of Corporation

DOCUMENT NUMBER:

P10000022602

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:

Randy Rampersad

Name of Contact Person

Home Link Armor Corporation

Firm/Company

2129 NW 22nd Street

Address

Pompano Beach FL 33069

City/State and Zip Code

Randy@HomeLinkArmor.com

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

For further information concerning this matter, please call:

Randy Rampersad

_.,954 .

647-7233

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



June 11, 2012

RANDY RAMPERSAD 1630 N OCEAN BLVD., #1113 POMPANO BEACH, FL 33062

SUBJECT: HOME LINK ARMOR CORPORATION

Ref. Number: P10000022602

We have received your document for HOME LINK ARMOR CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please list the name of the new registered agent in part 6 of your form.

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.

Carol Mustain Regulatory Specialist II

Letter Number: 412A00016383

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida recognitions or the control of Florida.
	the corporation: Home Link Armor Corporation
2. The principal	office address: 6950 Long Leaf Dr, Parkland FL 33076
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 03/12/2010 Document number: P10000022602
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Spiegel & Utrera P.A
	1840 SW 42nd St 4th Floor
	Miami Fl 33145
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Home Link Armor Corp
	2129 NW 22nd St Pompano Beach FL 33069
	P.O. Box NOT acceptable
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by esolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
The state of the s	Randy Kampersad:
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change. 6 25 12 Date
If signing on bel	half of an entity: Ved of Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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