

P10000081454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

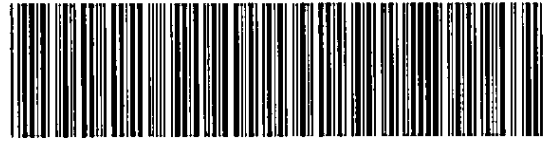
(Business Entity Name)

(Document Number)

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SEP 07 2021

09/08/21--01010--030 **25.00

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2021 OCT -4 PM 2:03

RA/Rc/chg

OCT 07 2021

ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GV Security Inc
Name of Corporation

DOCUMENT NUMBER: P10000081454

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:

German Villaseñor
Name of Contact Person

GV Security Inc
Firm/Company

2000 S Dixie Hwy # 204
Address

Miami FL 33133
City/State and Zip Code

Miami (5) Signal 88. com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

German Villaseñor at (305) 901-8888
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2021 OCT -4 PM 3:37



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2021

GERMAN VILLASENOR
2000 S DIXIE HWY
STE. 204
MIAMI, FL 33133

SUBJECT: GV SECURITY, INC
Ref. Number: P10000081454

We have received your document for GV SECURITY, INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The fee to file your document is \$35.

There is a balance due of \$10.00.

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.

Irene Albritton
Regulatory Specialist III

Letter Number: 921A00022613

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: GV Security Inc
2. The principal office address: 2000 S Dixie Hwy # 204
Miami FL, 33133
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/01/2010 Document number: P1000081454
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)

Frederick J. Barrett
2332 Galiano St 2nd floor
Coral Gables FL, 33134

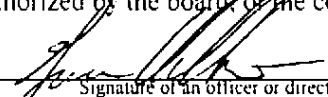
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

German Villaseñor
2000 S Dixie Hwy # 204
Miami FL, 33133
P.O. Box NOT acceptable

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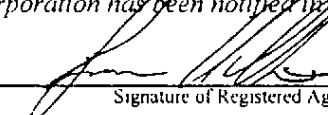
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

German Villaseñor
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

9/30/2021
Date

If signing on behalf of an entity:

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 (04/13)