

P12 0000 54026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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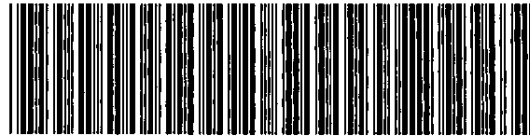
(Business Entity Name)

(Document Number)

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TO: Amendment Section
Division of Corporations

SUBJECT: PROFESSIONAL NIGHTLIFE SECURITY
Name of Corporation

DOCUMENT NUMBER: P12000054026

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:

JORGE R. FIGUERO
Name of Contact Person

PROFESSIONAL NIGHTLIFE SECURITY INC.
Firm/Company

12250 SW 132 CT #110
Address

MIAMI FL 33186
City/State and Zip Code

PNSPROTECTION@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JORGE FIGUERO at (305) 767-8350
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: PROFESSIONAL NIGHTLIFE SECURITY INC.
2. The principal office address: 12250 SW 132 CT #110
MIAMI FL 33186
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 06/14/2012 Document number: P12000054026
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)

BETSADE M. FIGUERO

13876 SW 56 ST #208

MIAMI FL 33175

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

JORGE A. FIGUERO

13381 SW 36 ST

P.O. Box NOT acceptable

MIAMI FL 33175

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.

Jorge A. Figuero
Signature of an officer or director

JORGE A. FIGUERO
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.

Jorge A. Figuero
Signature of Registered Agent

12/7/2012
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