

P 1300006 9204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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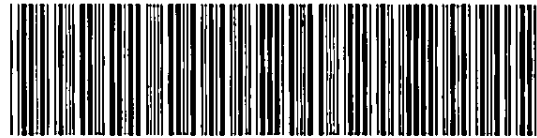
(Business Entity Name)

(Document Number)

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AUG 18 2017

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JANUARY 17, 2018

RA-6#1

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Secure Equity, Inc.  
Name of Corporation

DOCUMENT NUMBER: P13000069204

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:

Louanne Sinski  
Name of Contact Person

Secure Equity, Inc.  
Firm/Company

1620 Country Lane  
Address

Dunedin, FL 34698  
City/State and Zip Code

Louie3bees@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louanne Sinski at ( 716 ) 861-2119  
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: Secure Equity, Inc.
2. The principal office address: 1620 Country Lane  
Dunedin, FL 34698
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 08/20/2013 Document number: P13000069204
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)

United States Corporation Agents, Inc.  
13302 Winding Oaks Court, Suite A  
Tampa, FL 33612

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

William J. Kimpton, PA  
605 Palm Boulevard, Suite B  
P.O. Box NOT acceptable  
Dunedin, FL 34698

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.

Lenanne H. Sinski  
Signature of an officer or director

Lenanne H. Sinski Secretary  
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]  
Signature of Registered Agent

8/9/17  
Date

If signing on behalf of an entity:

WILLIAM J. KIMPTON

Typed or Printed Name

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