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COVER LETTER

'TO: 'Amendment Section Division of Corporations

SUBJECT:	Imonative Security Initiatives Inc
	Name of Corporation
DOCUMENT	NUMBER: P16000003819

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:

IRA WEISS
Name of Contact Person
INTINE SECURITY INTIATIVES INC Firm/Company
6586 West Athatic Ave. Suite 4640 Address
DelRAY BEACH, FL 33446 City/State and Zip Code
IRAWEISS OMAC, COM E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ica Weissat (516) 567 - 1466Name of Contact PersonArea 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

CR2E045 (03/12)

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 <u>FLORIDA</u>
1. The name of the corporation: Innovative Security Initiatives, Inc.
2. The principal office address: 6586 West Attactic Ave Site 4640
DelRay Beach FL 33446
3. The mailing address (if different):
 4. Date of incorporation/qualification: <u>01/22/2016</u> Document number: <u>P16000003819</u> 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 Alberts, Inc 59 3
United States Corporation Abants, Inc. AM I 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
IRA Weiss D' 0
6586 West Atlantic Ave Suite 4640
P.O. Box NOT acceptable DelRAY BEACH FL 33446

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.

Irea Weiss Free Printed or typed name and title tesident THESIDENT Signature of an officer or director

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.

2016 Date Signature of Registered Agent

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 (P2E045 (02/12)