3000033594



ACCOUNT NO.

072100000032

REFERENCE :

082956

1299A

AUTHORIZATION

COST LIMIT : \$ PPD

ORDER DATE: December 30, 1998

ORDER TIME :

9:15 AM

ORDER NO. : 082956

CUSTOMER NO:

1299A

600002725906---12/30/98--01005--009

*****35.00 *****35.00

CUSTOMER:

Scott M. Covell, Esq

Clark Partington Hart Larry

Suite 800

125 West Romana Street Pensacola, FL 32501

CHANGE OF AGENT

NAME:

CONSOLIDATED BURGLAR & FIRE

SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Karen B. Rozar

Florida Department of State, Jim Smith, Secretary of State

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, the undersigned corporation organized under the laws of the State of Georgia submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| of registered agent, or boar, in the otate of honda. |
|---|
| 1a. The name of the corporation is: CONSOLIDATED BURGLAR & FIRE SYSTEMS, INC |
| 1b. Date of incorporation 5/7/93 Document number P93000033594 |
| 2. The name and address of the current registered agent and office: Robert D. Hart, Jr., 125 W. Romana Street, Suite 800, |
| Pensacola, FL 32501 |
| 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Corporation Service Company, 1201 Hays Street |
| Tallahassee, FL 32301 |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer's authorized by the board. SIGNATURE DATE Such change was authorized by resolution duly adopted by its board of directors or by the board. **Application** Application** **Application** Application** **Typed or printed name and title** DATE |
| HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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. SIGNATURE (Registered Agent) DATE |
| Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 |

CR2E045 (7-91)

FILING FEE: \$35.00