-P9700063933

(Reque	stor's Name)	
(Addres	ss)	
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(Document Number)		
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SECRETARY OF STATE
ALLAHASSEF FIRED.

Arrilla Affilia Later C

COVER LETTER

TO: Ame Divis	ndment Section sion of Corporations		
SUBJECT:_	Brooks Security Inc. (Name of corporation)		
DOCUMEN	T NUMBER: P97000063933		
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:			
	(Name of contact person)		
	(
	Brooks Security Inc.		
	(Firm/Company)		
	Po Box 52-3498		
	(Address)		
Miami, FI 33152			
	(City/state and zip code)		
For further information concerning this matter, please call:			
	(Name of contact person) at () (Area code & daytime telephone number)		
Enclosed is a \$35.00 check made payable to the Department of State.			
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399		



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 28, 2005

BROOKS SECURITY INC. ATTEN: ALBERT FERNANDEZ P.O. BOX 52-3498 MIAMI, FL 33152

SUBJECT: BROOKS SECURITY INC.

Ref. Number: P97000063933

We have received your document for BROOKS SECURITY INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

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) 245-6927.

Tracy Smith Document Specialist

Letter Number: 105A00043606

1/2)

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 statement of change is submitted for a corporation organized under the in order to change its registered office or registered agent, or be	laws of the State of Florida
	soin, in the state of Florida.
1. The name of the corporation: Brooks Security Inc.	
2. The principal office address: PO Box 52-3498, Miami, Florida 33152	2
3. The mailing address (if different): PO Box 52-3498, Miami, Florida 3	33152
4. Date of incorporation/qualification: 1997 Document	nt number: P97000063933
5. The name and street address of the current registered agent and register Florida Department of State:	ered office on file with the
Albert Fernandez	
PO BOX 52-3498	
Miami, Florida 33152	
6. The name and street address of the new registered agent (if changed):	and /or registered office
Emesto Fernandez	
POBOX 52-0498 1150 NW 7 210	tre PES S
(P.O. Box NOT acceptable)	ACTO AND LETT
Miami, Florida 33152 Miami,	L 3312198 2 E
The street address of its registered office and the street address of the as changed will be identical.	business office of its registered agent
Such change was authorized by resolution duly adopted by its board authorized by the board, or the corporation has been notified in writing	of directors or by an of the change.
Albert Ferna	
I hereby accept the appointment as registered agent and agree to act I further agree to comply with the provisions of all statutes relative to of my duties, and I am familiar with and accept the obligation of my adocument is being filed merely to reflect a change in the registered of corporation has been notified in writing of this change.	(Printed or typed name and title) in this capacity, to the proper and complete performance position as registered agent. Or, if this ffice address, I hereby confirm that the
Emphotemule 3/15/05	
(Signature of Registered seem)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	

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