

P99000017630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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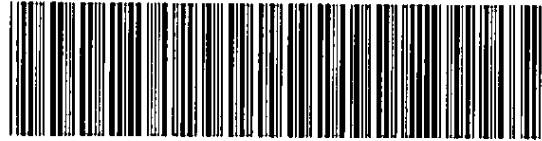
(Business Entity Name)

(Document Number)

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U.S. DEPT. OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D.C. 20535

C. GOLDEN

MAY 10 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Security A Fire Systems, Inc.
Name of Corporation

DOCUMENT NUMBER: P99000017630

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:

George A. Milian
Name of Contact Person

Security A Fire Systems, Inc.
Firm/Company

7451 Wiles Rd. Ste 101
Address

Coral Springs FL 33067
City/State and Zip Code

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

For further information concerning this matter, please call:

George A. Milian at (305) 439-8799
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SECURITY & FIRE SYSTEMS, INC.
2. The principal office address: 13210 SW 132nd Ave suite #18
Miami FL 33186
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/24/1999 Document number: P99000017630

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)

George A. Milian
4577 North Bob Hill Rd - Ste 205
Sunrise FL 33351

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

George A. Milian
7451 Wiles Rd. suite 101
P.O. Box NOT acceptable
Coral Springs, FL 33067

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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.

[Signature]
Signature of an officer or director

George A. Milian - President
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

4 / 12019
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE