I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

SIGNATURE: GERALD V MONTGOMERY

Electronic Signature of Signing Officer/Director Detail

GREENSBORO, NC 27401 **Current Mailing Address:**

2045 BLACK LAKE BLVD WINTER GARDEN . FL 34787 US

Current Principal Place of Business:

FEI Number: 27-1771614

DOCUMENT# F1100000102

130 EAST FISHER AVE

Name and Address of Current Registered Agent:

SOUTHEAST PROTECTION SERVICES INC 2045 BLACK LAKE BLVD WINTER GARDEN, FL 34787 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GERALD V MONTGOMERY

Electronic Signature of Registered Agent

Officer/Director Detail :

Title С Name MONTGOMERY, GERALD V Address 2045 BLACK LAKE BLVD City-State-Zip: WINTER GARDEN FL 34787

Entity Name: EAST COAST PROTECTIVE SERVICES INCORPORATED

FILED Mar 02, 2016 Secretary of State CC5540713720

Certificate of Status Desired: No

03/02/2016 Date

03/02/2016

Date

PRESIDENT\ CHAIRMAN