

CT CORPORATION  
**F02060003580**

CORPORATION(S) NAME

The American Citadel Guard, Inc.

FILED  
02 JUL 12 PM 2:04  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**BK**

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Profit   | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit           | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input checked="" type="checkbox"/> Foreign  | <input type="checkbox"/> Reinstatement          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Change of RA       |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Photocopies         | <input type="checkbox"/> Call When Ready        | <input type="checkbox"/> Call If Problem    |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out            |   |   |

RECEIVED  
02 JUL 12 AM 11:15  
DIVISION OF CORPORATION

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

7/12/02

Order#: 5446411

*ms*

900006349089--1  
-07/12/02--01028--020  
Ref#: \*\*\*\*\*70.00 \*\*\*\*\*70.00

Amount: \$ \_\_\_\_\_

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615



**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: C. Lamar Bridges

Address: 5091 Hwy 19, Ethel, LA 70730

Director: Gloria J. Bridges

Address: 130 W. Oak Lane, Lake Charles, LA 70605

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**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: C. Lamar Bridges

Address: 5091 Hwy 19, Ethel, LA 70730

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Gloria J. Bridges

Address: 130 W. Oak Lane, Lake Charles, LA 70605

Treasurer: Gloria J. Bridges

Address: 130 W. Oak Lane, Lake Charles, LA 70605

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. C. LAMAR BRIDGES, PRESIDENT/CEO

(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA  
State of Louisiana



**Fox McKeithen**

**SECRETARY OF STATE**

*As Secretary of State, of the State of Louisiana, I do hereby Certify that*

the Articles of Incorporation of

**THE AMERICAN CITADEL GUARD, INC.**

Domiciled at LAKE CHARLES, LOUISIANA,

Were filed in this Office and a Certificate of Incorporation was issued on June 30, 1986,

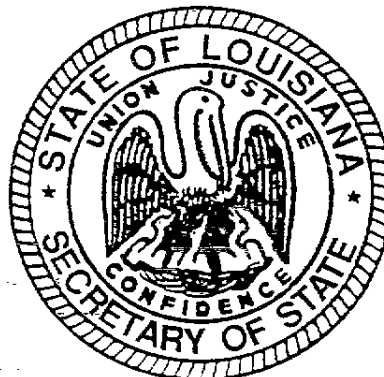
I further certify that no Certificate of Dissolution has been issued.

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08 JUL 12 PM 2:04  
SECRETARY OF STATE  
MONROE, LOUISIANA

*In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,*

June 26, 2002

*Fox McKeithen*



ABA 34212301D  
*Secretary of State*