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(Address)

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(Business Entity Name)

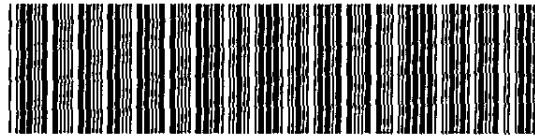
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J. BRYAN OCT 25 2005



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FILED
2005 OCT 24 PM 4:48
DIVISION OF CORPORATIONS,
TALLAHASSEE, FLORIDA

W05-46403
J. BRYAN OCT 7 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AJ SQUARED SECURITY INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SCOTT LOWELL
(Name of Person)

AJ SQUARED SECURITY INC
(Firm/Company)

Po Box 481
(Address)

MORRISVILLE, NY 11561
(City/State and Zip code)

DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA
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For further information concerning this matter, please call:

SCOTT LOWELL at (516) 223-0900
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status
 \$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 7, 2005

SCOTT LOWELL
AJ SQUARED SECURITY INC.
PO BOX 481
MERRICK, NY 11566

SUBJECT: AJ SQUARED SECURITY, INC.
Ref. Number: W05000046403

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TALLAHASSEE, FLORIDA

We have received your document for AJ SQUARED SECURITY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 505A00061201

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. AJ SQUARED SECURITY, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. 20-0023074
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MAY 2003 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NONE
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2068 ELLIOT DRIVE MERRICK, NY 11564
(Principal office address)

PO Box 481 MERRICK, NY 11566
(Current mailing address)

8. SECURITY SERVICE
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

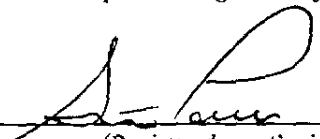
Name: SCOTT LOWELL

Office Address: 4801 NW 34th St. APT 6504

LAUDERDALE LAKES Florida 33319
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: Linda Lowell

Address: 2068 ELLIOT DRIVE
MORRICK, NY 11566

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Linda Lowell

Address: 2068 ELLIOT DRIVE
MORRICK, NY 11566

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: SWIT LOWELL

Address: 2068 ELLIOT DRIVE MORRICK, NY 11566

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TALLAHASSEE, FLORIDA

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

13. Linda J. Lowell
(Signature of Director or Officer listed in number 12 of the application)

14. LINDA LOWELL PRESIDENT
(Typed or printed name and capacity of person signing application)

State of New York
Department of State } **ss:**

I hereby certify, that the Certificate of Incorporation of AJ SQUARED SECURITY, INC. was filed on 05/14/2003, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 14th day of October two
thousand and five.*



Special Deputy Secretary of State

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