N03000008695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

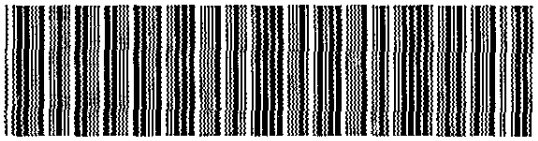
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

✓ D. WHITE OCT - 7 2003

Office Use Only



200023273832

10/03/03--01038--012 **78.75

FILED
03 OCT -3 PM 12:24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: FLORIDA ALERT RESPONSE TEAM, INC
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ $70.00 Filing Fee	☑ $78.75 Filing Fee & Certificate of Status	☐ $78.75 Filing Fee & Certified Copy	☐ $87.50 Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: SAMUEL CULP
Name (Printed or typed)

360 22ND AVENUE NW
Address

NAPLES, FL 34120
City, State & Zip

239-229-8413
Daytime Telephone number

NOTE: *Please provide the original and one copy of the articles.*

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

FILED

03 OCT -3 PM 12:24

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

FLORIDA ALERT RESPONSE TEAM, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

360 22ND AVENUE NW, NAPLES, FL 34120

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NON-PROFIT ORGANISATION FOR HOMELAND SECURITY PROGRAM

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

BY VOTES

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

1) SAMUEL CULP (MAJOR) P O BOX 367643, BONITA SPRINGS, FL 34136-7643
2) BRIAN MCMAHON (CAPTAIN) 360 22ND AVENUE NW, NAPLES, FL. 34210
3) MIKE SORRELL (LIEUTENANT) P O BOX 990447, NAPLES, FL. 34116

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The **name and Florida street address** of the registered agent is:

SAMUEL CULP (MAJOR) 360 22ND AVENUE NW, NAPLES FL. 34120

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

SAMUEL CULP (MAJOR) P O BOX 367643, BONITA SPRINGS FL. 34136

****

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent — Date: 10/01/2003

Signature/Incorporator — Date: 10/01/2003