

P04000035170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

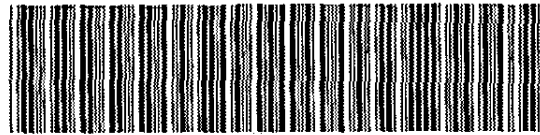
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/03/04--01011--011 **78.75

PROPRIETARY INFORMATION
FEBRUARY 24 2004

04 FEB 24 PM 1:08

FILED

52 2-24
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TRANSMITTAL LETTER

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

SUBJECT: NETWORK SECURITY SYSTEM
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: PAULA GIBSON
Name (Printed or typed)

6259 SW 194 AVE
Address

FT LAUDERDALE FL 33332
City, State & Zip

954-465-4680
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 11, 2004

PAULA GIBSON
6259 SW 194 AVE
FT LAUDERDALE, FL 33332

SUBJECT: NETWORK SECURITY SYSTEM
Ref. Number: W04000005844

We have received your document for **NETWORK SECURITY SYSTEM** and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of 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) 245-6884.

Shawn Logan
Document Specialist
New Filings Section

Letter Number: 804A00009336

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:
NETWORK SECURITY SYSTEM CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
6259 SW 194 AVE ,FT LAUDERDALE FL,33332

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
SECURITY & COMPUTER COMPANY

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
PAUL GIBSON 6259 SW 194 AVE , FT LAUDERDALE FL,33332
SHARON GIBSON 6259 SW 194 AVE FT LAUDERDALE FL,33332 (PRESIDENT)

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
PAUL GIBSON 6259 SW 194 AVE FT LAUDERDALE FL 33332

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
SHARON GIBSON 6259 SW 194 AVE FT LAUDERDALE FL 33332

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

JAN 6 2004

Date



Signature/Incorporator

JAN 6 2004

Date

FILED
04 FEB 24 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA