

PO6000141409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

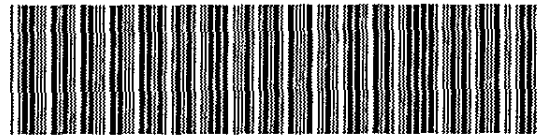
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400081385274

11/06/06--01021--024 \*\*551.25

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 NOV -6 AM 9:09

VH  
2006-11-06

Reg # W06000248854

**COVER LETTER**

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

**SUBJECT: ALLIANCE INSURANCE CENTER ON BISCAINE, INC**  
(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 type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: DMITRIY A SERGUNIN  
Name (Printed or typed)

293 NE 171 TERR  
Address

MIAMI, FL 33162  
City, State & Zip

786-709-5309  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 7, 2006

DMITRIY A SERGUNIN  
293 NE 171 TERR  
MIAMI, FL 33162

SUBJECT: MIAMI SECURITY CORPORATION, INC  
Ref. Number: W06000048854

We have received your document for MIAMI SECURITY CORPORATION, INC and your check(s) totaling \$551.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

An effective date may be added to the Articles of Incorporation **if a 2007 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

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) 245-6962.

Valerie Herring  
Document Specialist  
New Filing Section

Letter Number: 206A00065700

**ARTICLES OF INCORPORATION**

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 NOV -6 AM 9: 09

**ARTICLE I NAME**

The name of the corporation shall be:

ALLIANCE INSURANCE CENTER ON BISCAINE, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

293 NE 171 TERR  
MIAMI, FL 33162

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

INSURANCE

**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):

DMITRIY A SERGUNIN  
293 NE 171 TERR  
MIAMI, FL 33162

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DMITRIY A SERGUNIN

293 NE 171 TERR  
MIAMI, FL 33162

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

DMITRIY A SERGUNIN

293 NE 171 TERR  
MIAMI, FL 33162

\*\*\*\*\*

*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*

Dmitry Sergunin  
Signature/Registered Agent

11-8-2006  
Date

Dmitry Sergunin  
Signature/Incorporator

11-8-2006  
Date