

FOI 0000000 511

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXECUTIVE PROTECTION INTERNATIONAL 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:

JAY SENTER
(Name of Person)

900003575869--8
-01/26/01--01021--005
*****87.50 *****87.50

(Firm/Company)

780 NE 69th STREET # 2302
(Address)

MIAMI FLORIDA 33138
(City/State and Zip code)

For further information concerning this matter, please call:

JAY SENTER at (305) 757-3984
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

with
1/26

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

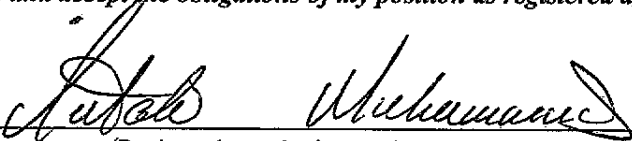
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. EXECUTIVE PROTECTION INTERNATIONAL INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. DELAWARE 3. Applied for 65-1068756
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. JANUARY 10, 2001 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 780 NE 69th ST MIAMI, FL 33138
(Principal office address)
780 NE 69th ST #2302
(Current mailing address)
8. EXECUTIVE PROTECTION / PROTECTION TRAINING
(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 or Mail Drop Box **NOT** acceptable)
Name: LUTALO MUHAMMUD
Office Address: 20268 NW 38th PLACE
MIAMI, Florida 33055
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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:

A. DIRECTORS

Chairman: LUTALO MUHAMMUD

Address: 20268 NW 38 PLACE
MIAMI, FL 33055

Vice Chairman: _____

Address: _____

Director: JAY SENTER

Address: 780 NE 69th ST. # 2302
MIAMI FL 33138

Director: _____

Address: _____

B. OFFICERS

President: LUTALO MUHAMMUD

Address: 20268 NW 38 PLACE
MIAMI FL 33055

Vice President: _____

Address: _____

Secretary: JAY SENTER

Address: 780 NE 69th ST #2302 MIAMI FL 33138

Treasurer: _____

Address: _____

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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. LUTALO MUHAMMUD - CHAIRMAN

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

State of Delaware
Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EXECUTIVE PROTECTION INTERNATIONAL INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF JANUARY, A.D. 2001.

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 00 JAN 25 AM 3:20
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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Harriet Smith Windsor
 Harriet Smith Windsor, Secretary of State
 AUTHENTICATION SECTION

DATE: 01-23-01