FD20000003564

| TO: Registration Section Division of Corporations | | |
|--|--|---|
| SUBJECT: Guadia | n Solutions Inc. | |
| (Na | me of corporation - must include suffix) | |
| Dear Sir or Madam: | | |
| The enclosed "Application by Foreign 6 "Certificate of Existence", and check as to transact business in Florida. | Corporation for Authorization to Transact Bus re submitted to register the above referenced for | siness in Florida", oreign corporation |
| Please return all correspondence concer | rning this matter to the following: | |
| JOHN MONTELION | a 1E | - |
| | (Name of Damon) | 005092 9552 |
| GUARDIAN SOU | UTIONS INC. | -06/05/0201066002 *****87.50 *****87.50 |
| | (Firm/Company) | |
| SUS3 OCTAN | BUD #128 | |
| | (Address) | · · · · · · · · · · · · · · · · · · · |
| SORASOTA FL | L 34843 | |
| | (City/State and Zip code) | |
| For further information concerning this r | matter, please call: | 2-16550 |
| ROBBETA NEWCOMBE (Name of Person) | at (941) 320-9685 (Area Code & Daytime Telephone Nu | mber) |
| | 16855=00310-DC | 1001 |
| 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 | APPKU AND FILE 02 JUL 11 / SECRETARY O TALLAHASSER |
| Enclosed is a check for the following amo | ount: | |
| ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Certificate o | g Fee & S78.75 Filing Fee & \$\sigma\$ss' of Status Certified Copy | 7.50 Filling FeeD & ertificate of Status & ertified Copy |

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 7, 2002

JOHN MONTELIONE GUARDIAN SOLUTIONS INC. 5053 OCEAN BLVD. #128 SARASOTA, FL 34242

SUBJECT: GUARDIAN SOLUTIONS INC.

Ref. Number: W02000016550

We have received your document for GUARDIAN SOLUTIONS INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 802A00037654

2 JUL 11 AM11: 32

APPROVILI

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. SOLUTIONS (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.) State or country under the law of which it is incorporated)

3. 86-6029702

(FEI number, if applicable) 5. PERPETUAC

(Duration: Year corp. will cease to exist or "perpetual") (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.) (Principal office address) (Current mailing address) PHYSICAL SECURITY SYSTEMS (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) 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.

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.

(Registered agent's signature)

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

| I, the undersigned John Mondeline, do (Name) | hereby certify |
|---|--|
| that this Resolution of the Board of Directors of | |
| Quardia Salutions Inc (Corporate Name) | |
| a corporation duly organized and existing under the laws of the State of Delection | art, |
| was duly adopted on | • |
| Be it resolved, that <u>Goodin Solutions</u> <u>Inc.</u> (Corporate Name) | |
| organized and existing in the State of Delewar, hereby adop | ots the name |
| Covardian Solutions of Sagsota INC. for u | se in Florida. |
| Dated: <u>O(30)0a</u> Signature of either Chairman, Vice Chairman or any officer Juhn Monde Lone | APPROVER AND FILED 02 JUL 11 AM 11: 3: SECRETARY OF STATE FLORING APPROVER AND APPROVED APPR |
| Type or print name | |

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

A. DIRECTORS

| Chairman: JOHN MONTELIONE | - i · |
|---|---------------|
| Address: S131 JUNGLE PLUM RUAD | |
| SARASOTAFI BYDYS | |
| Vice Chairman: | |
| Address: | |
| | · |
| Director: MICHABI BARON | - FUTTS |
| Address: 5053 OCEAN BLUD LIDE, SARASOZA FR 34242 | · - = |
| 7800 SOUTHLAND BLUD #250, ORLANDO F1 32809 | |
| Director: | |
| Address: | |
| | - |
| B. OFFICERS | |
| CEO JOHN MONTECIONE | |
| Address: S131 JUNGER PLUM ROAD | |
| SARAGOTA FC 34242 | <u> </u> |
| View President: MICHAEL BARON | - |
| Address: 7800 SOUTHCAND BLUD \$20, ORCANDO FC 30809 | <i>=</i> , |
| NAMES OF SECOND | |
| Secretary: John Montecione P. T. | |
| CO. T. Duis And CARACOTA E 342 FIX | 4 2 |
| | , . |
| Address: S131 JUNGLE PLUM LUAD SARAFOTA FC 34242 500 100 | |
| Address: S131 JUNGLE PLUM LUAD SARAFORA PE 34042 5m 10 | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. | |
| $\sim \chi_{\rm M}/\Lambda$ | , |
| (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) | |
| 14. JOHN MONTECONF CHAILMAN (Typed or printed name and capacity of person signing application) | - |

Delaware

The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GUARDIAN SOLUTIONS 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-EIGHTH DAY OF MAY, A.D. 2002.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1799415