F03000	001790
(Requestor's Name) (Address) (Address)	800015426558
(City/State/Zip/Phone #)	04/08/0301012008 **78.75
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	мјн
Special Instructions to Filing Officer: 4 8 FOR OPP WS Office Use Only	FILED 03 APR -8 PH 2: 45 SECFERANCY OF STATE TALLAWASSEE FLORIDA
Chris Brown Gave Authorization by Phone to correct Suffix on Resolution "F DATE 41103 DOC. EXAM	inc." + R/A name

\_· \_\_\_

# Premium Security, Inc.

1082 Forrest Blvd Decatur, GA 30030

April 4, 2003

Dear Sir or Madam:

Please find enclosed my application for registration of a foreign corporation. I also need a Copy of the certificate of status sent to me Chris-Brown 1982 Forrest Blvd - Decatur-OA 30030; I have included a self-addressed envelope. I am under a dead line for application for a Low voltage license and would appreciate any help you can be in speeding the certificate of status back to me. Thanks for your help if you have any questions please contact me at 770-480-1995.

Sincerely,

Chris Brown

President

ے۔ \_\_\_\_\_ - Dawn Johnson 2110 North Ocean Blud Surte 1503

Fort Lauderdale FL 33305

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

remium SUBJECT: (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:

Dawn Johnson				
(Na	me of Person)			
	· · · · · · · · · · · · · · · · · · ·			
(Ffr	m/Company)			
2110 North Ocean		Suite 1503		
(Address)				
Fort, Lauderdale	_ FL	33305		
	State and Zip code	·)		

For further information concerning this matter, please call:

at (<u>770</u>) <u>480</u> - <u>1995</u> (Area Code & Daytime Telephone Number) (Name of Person)

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

Enclosed is a check for the following amount:

□ \$70.00 Filing Fee

X \$78.75 Filing Fee & Certificate of Status Certified Copy

\$87.50 Filing Fec. Certificate of Status & Certified Copy

NO.162 P.2/2

# **RESOLUTION OF BOARD OF DIRECTORS**

(Please print or type)

I, the undersigned	Chris	Brown	7:	_, do hereby certify
	(	(Name)		_ ,

that this Resolution of the Board of Directors of <u>Premium Security Inc.</u>

(Corporate Name) a corporation duly organized and existing under the laws of the State of emi was duly adopted on Be it resolved, that  ${}^{\mathcal{O}}$  $\sim$ (Corporate Name) organized and existing in the State of OM hereby adopts the name for use in Florida. 3 Dated:

of either Chairman. Signature Vice Chai

or print name

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

INHS19(1/00)

### 954-567-3401

p.9

### 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.

2

	Premium Decurity 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.)
	natural person of partnership it not so contained in the name at present.)
2.	<u>Georgia</u> <u>3. 02-0.591162</u>
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4,	<u>4-12-02</u> (Date of incorporation) 5. <u>per pet val</u> (Duration: Year corp. will cease to exist or "perpetual")
6.	_ upon qualification
1	(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, 1,S.)
7	1082 Forrest Blud Decatur 6A 30030
	(Principal office address)
•	(Current mailing address)
8	
0.	Sales + installation of security service
	(Purpose(s) of comparison without and in home state or country to be considered out in state of Elected.)
	(Purpose(s) of comparison without and in home state or country to be considered out in state of Elected.)
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
	Name: <u>1552</u> <u>Charow</u> <u>RA</u> <u>DUNN</u> <u>AYMAN</u> <u>AYMAN</u>
9.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and <u>street address</u> of Florida registered agent: (P.O. Box or Mail Drop Box <u>NOT</u> acceptable) Name: <u>1552 CHARON Rd</u> DINNY AYMAN
9.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and <u>street address</u> of Florida registered agent: (P.O. Box or Mail Drop Box <u>NOT</u> adcoptable) Name: <u>4552 Charon Rd</u> DUNNY AYMAN
9.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and <u>street address</u> of Florida registered agent: (P.O. Box or Mail Drop Box <u>NOT</u> adcoptable Name: <u>1552 CHARON Ref</u> DUNY AYMAN

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.

r 29 03 03:11p API	954-567-3401	p.10
2. Names and business addresses of officers and/or directo	rs:	
. DIRECTORS		
hairman:		
idress:	<u></u>	
ce Chairman:		
ldress:		
rector:		
idress;	······	
rector:		
dress:		
OFFICERS		
sident <u>Christopher Brown</u> dress: 1082 Forrest Blvd De	catur 6A 30030	
ce President:		
dress:		<u> </u>
rciary:		
dress:		
asurer:		
tress:		
TE: If necessary, you may attach an addendum to the application	ation listing additional officers and/or direct	stors.
Chr Hm	g or we want of the or of the	
(Signature of Chairman, Vice Chairman, or any o	officer listed in number 12 of the application President	on)
Christopher Brown		

# Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

	0220180
DATE INC/AUTH/FILED:	04/12/2002
	GEORGIA
PRINT DATE :	04/02/2003
FORM NUMBER :	211

PREMIUM SECURITY CHRISTOPHER BROWN 1082 FORREST BLVD DECATUR, GA 30030

### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

PREMIUM SECURITY, INC. A GEORGIA PROFIT CORPORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Tode of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20030402202914710



Cathy Cox Secretary of State