



TRANSMITTAL LETTER

FILED

TO: Registration Section  
Division of Corporations

2004 OCT 18 P 3:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: Seibold Security Incorporated  
(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:

Kelly D'Ambrosia  
(Name of Person)

Seibold Security, Inc.  
(Firm/Company)

12 Aqueduct Street  
(Address)

Rochester, NY 14614  
(City/State and Zip code)

For further information concerning this matter, please call:

Kelly D'Ambrosia at ( 585 ) 546-4990  
(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

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

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.

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TALLAHASSEE, FLORIDA

1. Seibold Security, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. New York 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 13, 1979 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 12 Aqueduct Street, Rochester, NY 14614  
(Principal office address)
- Same as above  
(Current mailing address)

8. Design and install commercial 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 NOT acceptable)

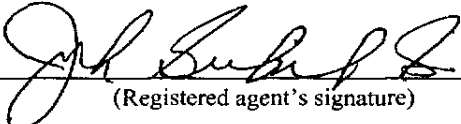
Name: John Seibold, Sr.

Office Address: 7119 Castle Island Drive

Sarasota, Florida 34240  
(City) (Zip code)

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: \_\_\_\_\_

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Address: \_\_\_\_\_

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Vice Chairman: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: John Seibold

Address: 12 Aqueduct Street

Rochester, NY 14614

Vice President: John Seibold, Jr.

Address: 12 Aqueduct Street

Rochester, NY 14614

Secretary: Timothy Seibold

Address: 12 Aqueduct Street, Rochester, NY 14614

Treasurer: NA

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Tim Seibold, Corporate Secretary

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

**State of New York** } **ss:**  
**Department of State**

*I hereby certify, that the Certificate of Incorporation of SEIBOLD SECURITY, INC. was filed on 03/13/1979, under the name of NEW YORK SECURITY PRODUCTS, INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation. I further certify the following:*

*A certificate changing name to SECURITY PRODUCTS AND SERVICES OF ROCHESTER, INC. was filed on 07/25/1983.*

*A Certificate of Merger was filed on 10/24/1988.*

*A Certificate of Merger was filed on 01/28/1997.*

*A Biennial Statement was filed 01/14/1998.*

*A Biennial Statement was filed 03/10/1999.*

*A Biennial Statement was filed 03/20/2001.*

*A Biennial Statement was filed 03/04/2003.*

*A certificate changing name to SEIBOLD SECURITY, INC. was filed on 07/29/2003.*

*I further certify, that no other documents have been filed by such Corporation.*

\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 23rd day of August  
two thousand and four.*



*Secretary of State*