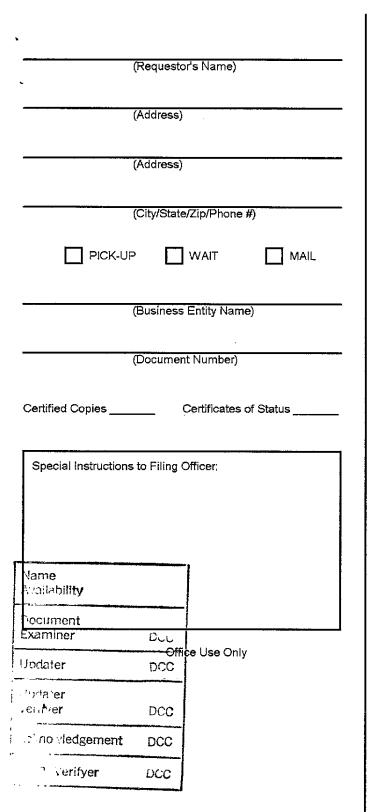
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### TRANSMITTAL LETTER

TO:	Registration Se Division of Co				
SUBJ	ЕСТ: <u>540</u>	weity Total	grators, Tuc.		
Dear Si	ir or Madam:				
"Certifi		tion by Foreign Corporation e," and check are submitted rida.			
Please	return all corres	condence concerning this ma	atter to the following:		
	Nichae	1 Scott Kzw. (Name	e of Person)		
<u> </u>	Securit				
		Jutecrater (Firm	/Company)		
40	39 Mat	thews Indiai	Jean Road	38. 38.	
			(ddress)	PSR 2	
<b>\( </b>	HALLINGS	, NC 28/04		JAH RETA	
(City/State and Zip code)				10-< -	
For further information concerning this matter, please call:					
$\wedge$		_ · · ·		32 TE 10	
Con	Nie Gil	MERE at (MU)	1 1821-4671		
	(Name of Pers		ea Code & Daytime Teleph	one Number)	
	STREET ADI	ADTCC.	MAILING A	nneecc.	
Registration Section Division of Corporations			_	Registration Section	
			Division of C	Division of Corporations	
409 E. Gaines St. P.O. Box 6					
	Tallahassee, FI	2 32399	Tallahassee, I	·L 32314	
Enclose	ed is a check for	the following amount:			
<b>570</b> .	.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 6, 2005

SECURITY INTEGRATORS, INC. 4039 MATTHEWS INDIAN TRAIL ROAD STALLINGS, NC 28104

SUBJECT: SECURITY INTEGRATORS, INC.

Ref. Number: W05000000917

We have received your document for SECURITY INTEGRATORS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6913.

Letter Number: 505A00001151

Diane Cushing Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

### 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. (Enter name of corporation, must include "ENCORPORATED," "COMPANY," "CORPORATION," Interrators "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) Sept. 5, 2000 (Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Matthews Indian TEAI (Principal office address) 28104 (Current mailing address) (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: Mendow Wood Do Office Address: 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: Address: Vice Chairman: Address: \_\_\_\_\_\_ Director: Address: \_\_\_\_\_ Address: **B. OFFICERS** President: Michael Scott KENNEdy Address: 7306 Shadowlake Dr. Charlotte, NC 28226 Vice President: Address: Secretary: Nicole To KENDERLY Address: 7306 Shadowlar DR, Charlotte NC 28226 Treasurer: Ch NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. Micaal Sear Korral (Signature of Director or Officer listed in number 12 of the application) 14. Michael Scott Kennedy (Typed or printed name and capacity of person signing application)



## NORTH CAROLINA Department of The Secretary of State

### CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

### SECURITY INTEGRATORS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 5th day of September, 2000, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 12th day of January, 2005

Secretary of State

Elaine I. Marshall

Certification# 84339384-1 Reference# 7716505-ACH Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification