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2005 JAN 26 A 5: 47 SECRETARY OF STATE (Requestor's Name (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status _ Special Instructions to Filing Officer:

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 3, 2005

DONALD M. CARDINA 1026 EAGLES RIDGE COURT LAWRENCEVILLE, GA 30043

SUBJECT: STAR SECURITY SERVICE, INC.

Ref. Number: W05000005850

We have received your document for STAR SECURITY SERVICE, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

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.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 805A00007912

Agnes Lunt Document Specialist

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

TRANSMITTAL LETTER

FILED

TO: Registration Section Division of Corporations SECRETARY OF STATE TALLAHASSEE. FLORIDA (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:
Donald M. Cardina (Name of Person)
(Name of Person)
Star Security Service, Inc. (Firm/Company)
(Firm/Company)
1026 Eagles Ridge Court
(Address)
1026 Engles Ridge Court (Address) Lawrenceville, GA. 30043 (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call: Donald M. Cardina at (404) 713.0185 (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 & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy

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

•		DUBLINESS IN	LOKIDA		-	• •	-
IN COMPLIANCI REGISTER A FO	E WITH SECTION 607.150 REIGN CORPORATION T	3, FLORIDA STAT O TRANSACT BUS	UTES, THE INESS IN T	T FOLLOWIN THE S <u>T</u> ATE O	G IS SUB MI T F FLORIDA.	EDED	
1 Star	Security Service	Inc.			ZOOS JAN	D1	
(Enter name of o	corporation; must include "IN	CORPORATED," "(COMPANY,	" "CORPORA	LIOIN,	~ 4 1	
"Inc.," "Co.," "C	!orp," "Inc," "Co," or "Corp.")	l			SECRETAR	EY OF STATE	
					IALLAHAS:	RY OF STATE SEE, FLORIDA	
(If name unavail	able in Florida, enter alternate	corporate name ado	oted for the	ourpose of trans	sacting business	n Florida)	
		•					
2. State or country	under the law of which it is in			(FEI number, i	f applicable)		-5
(Saile of County)		,	0, 1	1			
4	e of incorporation)	5. <u></u>	Lepetus	A arm will on	ase to exist or "p	ametus!"\	
*		(L)	uration: re	ar corp. will cea	ase to exist of p	erpetuar)	
6. <u>(Ypo</u>	n licensina				· · · · · · · · · · · · · · · · · · ·		
•		sacted business in Flo 07.1501 & 607.1502,					
7. 1026 B	Eagle Ridge Court	Laurencevill	e, GA	30043			
1026 E	agle Ridge Court	Lawrenceville	, JA	30043			
	0 0 (Cu	rrent mailing address)				
· Flor	trical Contraction	A					
(Purpose(s) of corporation authorized by	home state or count	y to be carri	ed out in state	of Florida)		
9. Name and stre	et address of Florida registe	ered agent: (P.O. B	ox <u>NOT</u> ac	cceptable)			
Mana	Dawn R. Tate-			•			-
Name:							
Office Address:	2110 N. Ocean B	Ivd. Swite 150	<u>3</u>	,			
	Ft. Landerdale		771 '1	72204			
	[City]		_, Florida	(Zip code)	- *		Ţ.
	(City)	,		(Exp code)			
	gent's acceptance:						
	ned as registered agent and						
	s application, I hereby acco comply with the provisions						
	r with and accept the oblig				p. co.c. p. c. y c. c. c.		-,
•	11		-				
		1.					
V	1 Amos I	mstag	4				
•	(Registered	gent'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: _ Address: __ Address: _ **B. OFFICERS** President: Donald 30043 Vice President: Elizab Secretary: Donald M. Cardi Address: _ Treasurer: Address: NOTE: It necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)