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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: NE Security Systems of Central Oh (Name of corporation must include suffix)	ıi (
Dear Sir or Madam:	M
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:	
Cample A. Coolidge, ESG (Name of Person)	
Camille A Coolidge, PA (Firm/Company)	
(Firm/Company)	
401 E. Las Olas Blv2 771400	
(Address)	
H. Lauderdale, FL 53501	
(City/State and Zip code)	
For further information concerning this matter, please call:	# 5
Camille Colicio at (954) 761. 7781 (Name of Person) (Area Code & Daytime Telephone Number)	
GRIDA 16	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing 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 Certified Copy 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.

2. Ohio (State or country under the law of which it is incorporated) 4. 1-9-06 (Date of incorporation) 5. Per p	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 5575 Poseland Dave, Galera, OH 43021 (Principal office address)	
(Current mailing address) 8. Any lawful business (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: Camille A. Coolidge, Esq. Office Address: Camille A. Coolidge, PA, 401 E. Las Olas Blud Th. Lauderdule, Florida 3330/ (City) (Zip code)	#11

(Registered agent seignature)

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: John Chapan	
Address: Zb11 N. Riverside Drive # 208	
Pompano Beach, FL 33067	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President:	70
Address:)6 A
	ASS 00
Vice President:	
Address:	<u>ς</u> , ω
	DA 16
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional offi	icers and/or directors.
13. Signature of Director or Officer listed in number 12 of the application	on)
14. Tohn Chapan (Typed or printed name and capacity of person signing application	
(Typed or printed name and capacity of person signing application)

United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show ACE SECURITY SYSTEMS OF CENTRAL OHIO, INC., an Ohio corporation, Charter No. 1593072, having its principal location in Galena, County of Delaware, was incorporated on January 09, 2006 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 3rd day of March, A.D. 2006

Ohio Secretary of State

Validation Number: V200662MA7DA1