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TALLAHASSEE, FLORIDA

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FOREIGN PROFIT/NONPROFIT CORPORATION

3VR Security, Inc.

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J. Shivers AUG 24 2006

# 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.

1. 3VR 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. California

(State or country under the law of which it is incorporated)

3. 48-1281017

(FEI number, if applicable)

4. 09/23/2002

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 12/30/2005

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

7. 185 Berry Street, Suite 4150, San Francisco, CA 94107

(Principal office address)

same

(Current mailing address)

8. Sales of Intelligent Video Management System.

(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(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.

CT Corporation System

By: Naseem A. Conde

(Registered agent's signature)

NASEEM A. CONDE  
SPECIAL ASST. SECRETARY

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:

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TALLAHASSEE, FLORIDA

**A. DIRECTORS SEE ATTACHMENT**Chairman: Stephen RussellAddress: 185 Berry Street, Suite 4150San Francisco, CA 94107

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

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

Director: Bob ValloneAddress: 185 Berry Street, Suite 4150San Francisco, CA 94107Director: Jay ShiveleyAddress: 185 Berry Street, Suite 4150San Francisco, CA 94107**B. OFFICERS SEE ATTACHMENT**President: Timothy RossAddress: 185 Berry Street, Suite 4150San Francisco, CA 94107

Vice President: \_\_\_\_\_

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

Secretary: Timothy RossAddress: 185 Berry Street, Suite 4150 San Francisco, CA 94107

Treasurer: \_\_\_\_\_

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. Timothy Ross, President

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

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TALLAHASSEE, FLORIDA

## Attachment

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Attachment to Florida  
Officers & Directors

- 
- |    |                   |                              |
|----|-------------------|------------------------------|
| 1. | Full Name:        | Stephen Russell              |
|    | Officer/Director: | Officer, Director            |
|    | Officer's Title:  | CEO, CFO                     |
|    | Director's Title: | Chairman                     |
|    | Business Address: | 185 Berry Street, Suite 4150 |
|    | City:             | San Francisco                |
|    | State:            | CA                           |
|    | ZIP Code:         | 94107                        |
| 2. | Full Name:        | Timothy Ross                 |
|    | Officer/Director: | Officer                      |
|    | Officer's Title:  | President & Secretary        |
|    | Business Address: | 185 Berry Street, Suite 4150 |
|    | City:             | San Francisco                |
|    | State:            | CA                           |
|    | ZIP Code:         | 94107                        |
| 3. | Full Name:        | Doug Collom                  |
|    | Officer/Director: | Officer                      |
|    | Officer's Title:  | Asst Secretary               |
|    | Business Address: | 185 Berry Street, Suite 4150 |
|    | City:             | San Francisco                |
|    | State:            | CA                           |
|    | ZIP Code:         | 94107                        |
| 4. | Full Name:        | Jay Shiveley                 |
|    | Officer/Director: | Director                     |
|    | Officer's Title:  |                              |
|    | Director's Title: | Other Director               |
|    | Business Address: | 185 Berry Street, Suite 4150 |
|    | City:             | San Francisco                |
|    | State:            | CA                           |
|    | ZIP Code:         | 94107                        |
| 5. | Full Name:        | Ted Schlein                  |
|    | Officer/Director: | Director                     |
|    | Officer's Title:  |                              |
|    | Director's Title: | Other Director               |
|    | Business Address: | 185 Berry Street, Suite 4150 |
|    | City:             | San Francisco                |
|    | State:            | CA                           |
|    | ZIP Code:         | 94107                        |

## Attachment

Page 1 of 2

**Attachment to Florida  
Officers & Directors**

- 
- |      |                   |                              |
|------|-------------------|------------------------------|
| 1.   | Full Name:        | Stephen Russell              |
|      | Officer/Director: | Officer, Director            |
|      | Officer's Title:  | CEO, CFO                     |
|      | Director's Title: | Chairman                     |
|      | Business Address: | 185 Berry Street, Suite 4150 |
|      | City:             | San Francisco                |
|      | State:            | CA                           |
|      | ZIP Code:         | 94107                        |
| <br> |                   |                              |
| 2.   | Full Name:        | Timothy Ross                 |
|      | Officer/Director: | Officer                      |
|      | Officer's Title:  | President & Secretary        |
|      | Business Address: | 185 Berry Street, Suite 4150 |
|      | City:             | San Francisco                |
|      | State:            | CA                           |
|      | ZIP Code:         | 94107                        |
| <br> |                   |                              |
| 3.   | Full Name:        | Doug Collom                  |
|      | Officer/Director: | Officer                      |
|      | Officer's Title:  | Asst Secretary               |
|      | Business Address: | 185 Berry Street, Suite 4150 |
|      | City:             | San Francisco                |
|      | State:            | CA                           |
|      | ZIP Code:         | 94107                        |
| <br> |                   |                              |
| 4.   | Full Name:        | Jay Shiveley                 |
|      | Officer/Director: | Director                     |
|      | Officer's Title:  |                              |
|      | Director's Title: | Other Director               |
|      | Business Address: | 185 Berry Street, Suite 4150 |
|      | City:             | San Francisco                |
|      | State:            | CA                           |
|      | ZIP Code:         | 94107                        |
| <br> |                   |                              |
| 5.   | Full Name:        | Ted Schlein                  |
|      | Officer/Director: | Director                     |
|      | Officer's Title:  |                              |
|      | Director's Title: | Other Director               |

**Attachment**

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**Business Address:**

**185 Berry Street, Suite 4150**

**City:**

**San Francisco**

**State:**

**CA**

**ZIP Code:**

**94107**

**State of California  
Secretary of State**

**CERTIFICATE OF STATUS  
DOMESTIC CORPORATION**

I, **BRUCE McPHERSON**, Secretary of State of the State of California, hereby certify:

That on the **23rd day of September, 2002**, **3VR SECURITY, INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

**IN WITNESS WHEREOF**, I execute this certificate and affix the Great Seal of the State of California this day of April 12, 2006.



**BRUCE McPHERSON**  
Secretary of State