

MRD 1/8/08

007-56975

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Safeguard Security and Surveillance Inc.

(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:

Mark Tosoni

(Name of Person)

Safeguard Security and Surveillance Inc.

(Firm/Company)

7011 Grand National Dr

(Address)

Orlando, FL 32819

(City/State and Zip code)

For further information concerning this matter, please call:

John Bowen

(Name of Person)

at (860) 741-3900

(Area Code & Daytime Telephone Number)

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 &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
08 JAN -7 AM 8:00
DIVISION OF CORPORATIONS

November 20, 2007

MARK TOSONI
SAFEGUARD SECURITY AND SURVEILLANCE INC.
7011 GRAND NATIONAL DR
ORLANDO, FL 32819

SUBJECT: SAFEGUARD SECURITY AND SURVEILLANCE INC.
Ref. Number: W07000056975

We have received your document for SAFEGUARD SECURITY AND SURVEILLANCE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of incorporation listed on the form for the corporation must match the date on the certificate of status.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 207A00066695

**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. **Safeguard Security and Surveillance 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. **Connecticut**

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

3. **20-8612517**

(FEI number, if applicable)

4. ~~August 8, 2007~~ **MAY 25, 2007**

(Date of incorporation)

5. **Perpetual**

(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. **113 Elm St Suite 100 Enfield, Ct 06082**

(Principal office address)

(Current mailing address)

8. **Security System and Video**

(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:

~~Safeguard Security and Surveillance Inc.~~ **MARK TOSONI**

Office Address:

7011 Grand National Dr Suite 100

Orlando

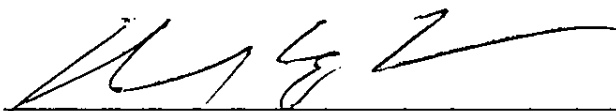
(City)

, Florida **32819**

(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.

FILED
08 JAN -7 AM 9:26
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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08 JAN -7 AM 9:26
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Mark Theriaque

Address: 65 Thistledown
Suffield, CT 06078

Vice President: Mark Tosoni

Address: 5244 Oak Island Rd
Orlando, FL 32809

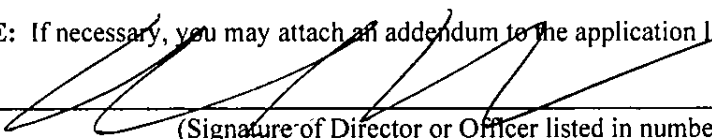
Secretary: John Bowen

Address: 38 Pinehurst St Westfield, Ma 01085

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. Mark Theriaque President
(Typed or printed name and capacity of person signing application)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that the certificate of incorporation of

SAFEGUARD SECURITY AND SURVEILLANCE INC.

a domestic STOCK corporation, was filed in this office on May 25, 2007, a certificate of dissolution
has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of
this office such corporation is in existence.



Secretary of the State

Date Issued: November 16, 2007

FILED
08 JAN - 7 AM 9:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA