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* MAND ME CANADANA CONTROL CON

To:

Division of Corporations

Fax Number : (850) 617-6381 -

From:

Account Name : FLORTDA FILING & SEARCH SERVICES

Account Number : 12000000189

Phone : (850)216-0457

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FOREIGN PROFIT/NONPROFIT CORPORATION

Consolidated Safety Services, Inc.

Certificate of Status	0
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Division of Corporations

Florida Department of State

H 0 8 0 0 0 1 0 4 7 0 g

	BUSINESS	ION FOR AUTHORIZATION TO TRANSACT (1) IN FLORIDA	TO MINES
IN COMPLIANCE REGISTER A FOR	WITH SECTION 607.1503, FLORIDA S LEIGN CORPORATION TO TRANSACT	TATUTES, THE FOLLOWING IS SUBMITTED TO SBUSINESS IN THE STATE OF FLORIDA.	17 3°
Consolid	ated Safety Services In	Coronnated	4 4
(Enter name of co	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	(A. 35)
(If name unavaita	ble in Plorida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	Υ
₂ Virginia		54-1480935	
,e. <u> </u>	under the law of which it is incorporated)	(FEI number, if applicable)	
4 9/8/1988	*	perpetual	
T	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
7. 10301 De	(Date first transacted business i (SEE SECTIONS 607,1501 & 607,1 emocracy Lane, Fairfax, (Principal office add		
	(Current mailing add	iresa)	
8. Consultin	na	,	
***	of corpuration authorized in home state or or	ountry to be carried out in state of Florida)	
9. Name and street	t address of Florida registered agent: (P.C). How NOT proceedable)	
Name:	Registered Agents Legal Se	•	
Office Address:	155 Office Plaza Drive,	. ***	
•	Tallahassee	, Plorida 32301	!
	(City)	, Plorida (Zíp code)	;
10. Registered ag	ent's acceptance: ed as registered agent and to accept servi	CE of Drocess for the above stated cornoration at the place	
Jurther agree to co	application, I hereby accept the appoints imply with the provisions of all statutes r with and accept the obligations of my po	nent as registered agent and agree to act in this cupacity. I relative to the proper and complete performance of my dutie sition as registered agent.	5,
	Which lef	che luc	

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.

(Registered agent's signature)

ORIDA FILING	FAX NO. :8502160	460	Apr. 22	2008 11:35AM P3/4	
	,	ñ o	000	1 0 4 7 0 ZOBAPA ZALLAHASARY	55~/ _/
. Names and business addresses of o	fficers and/or directors:			ALICAS A	2
DIRECTORS				AHASAL	14/1
nairman:	•				
ldress:					OPIE
					~A
ice Chairman:					
ddress:				H-1	
Jolanda Janczew					
ddress: 11705 Amkin Dri Clifton, VA 2012					
incoor: Dennis Lauchner					
ddress: 24165 N. 77th St		. ,			
Scottsdale, AZ 8		·			
. OFFICERS					
resident: Jolanda Janczev	vski				
ddress: 11705 Amkin Dri					
Clifton, VA 2012					
ice President: Dennis Lauch			**************************************		
ddress: 24165 N. 77th St					
Scottsdale, AZ 8					
coretary:		***			,
ddress:					•
reasuror:					
ddreas:		·			
Ютр. 15		g*y			
OTE: If necessary, you may attach a	in addondrim to the application	on listing additio	onal Officers and	or directors.	
3. (Signature of Di	rector or Officer listed in nur	mber 12 of the s	pplication)		
4. Jolanda	Janzens		siden	<u> </u>	
(Typed or prin	ted name and capacity of per	mon signing and	lication)		

Commonboxalthor Unginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

CONSOLIDATED SAFETY SERVICES INCORPORATED is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is September 08, 1988.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: March 18, 2008

Joel H. Peck, Clerk of the Commission

CI\$0502