

F09000000/301

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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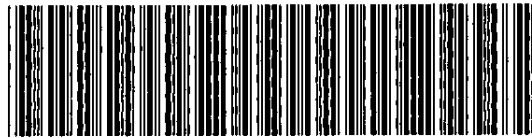
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
2009 MAR 31 PM 3:36
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TALLAHASSEE, FLORIDA
09 MAR 31 PM 3:44

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: JAT Bureau of Protective Services and Management 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:

Arthur Coleman III
(Name of Person)

JAT Bureau of Protective Services and Management Inc.
(Firm/Company)

P.O. Box 230576
(Address)

Montgomery AL 36123
(City/State and Zip code)

For further information concerning this matter, please call:

Joseph Hardy at (334) 239-7437
(Name of Person) (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

**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. JAT Bureau of Protective Services and Management 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. Alabama 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 28, 2006 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 604 E. Patton Ave. Montgomery, AL 36111
(Principal office address)

P.O. Box 230576 Montgomery, AL 36123
(Current mailing address)

8. Security Services
(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: Arthur Coleman III

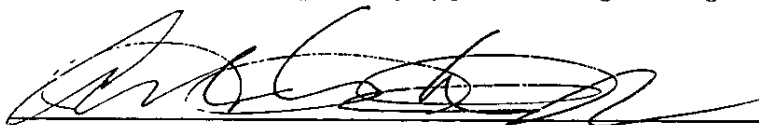
Office Address: 2500 Minnesota Ave.

Lynn Haven, Florida 32444
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

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

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A. DIRECTORS

Chairman: Arthur Coleman III 09 MAR 31 PM 3:44
Address: 470 Durden Rd.
Prattville, AL 36067 (334) 676-9143
Vice Chairman: Sharon Hardy
Address: 28 Fairlane Dr.
Montgomery, AL 36106 (334) 294-0018
Director: Vincent McKinney
Address: 1000 David Dr.
Montgomery, AL 36117 (334) 782-2117
Director: _____
Address: _____

B. OFFICERS

President: Joseph Hardy
Address: 28 Fairlane Dr
Montgomery, AL 36106 (334) 676-9147
Vice President: TRAMIKA COLEMAN
Address: 470 Durden Rd.
Prattville, AL 36067 (334) 717-9065
Secretary: Sarah Green (334) 284-2278
Address: 4439 Wimbledon Rd Montgomery, AL 36116
Treasurer: Murphy Green (334) 284-2278
Address: 4439 Wimbledon Rd Montgomery, AL 36116

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. Arthur Coleman III Chairman/Owner
(Typed or printed name and capacity of person signing application)

Beth Chapman
Secretary of State

P.O. Box 5616
P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that JAT Bureau of Protective Services & Management Inc. incorporated in Montgomery County, Montgomery, Alabama on February 28, 2006. I further certify that the records do not disclose that said JAT Bureau of Protective Services & Management Inc. has been dissolved.

STATE OF ALABAMA
FILED
2009 FEB -4 PM 12:54
09 MAR 31 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

February 4, 2009

Date

Beth Chapman

Beth Chapman

Secretary of State