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(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP		MAIL
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(Bu	isiness Entity Name	e)
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE

CORPORATE ACCESS,

AWhen you need ACCESS to the world≅

INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALKIN			
		PICK UP:	3/10 Emily
		CERTIFIED COPY	<i>J</i>
	図	РНОТОСОРУ	
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	区	FILING _	Inc.
1.		Poject and Secure of Corporate Name and document	unity Solutions, Inc.
2.	-	(CORPORATE NAME AND DOCUMEN'	(°#)
3.	-	(CORPORATE NAME AND DOCUMEN'	
4.	-	(CORPORATE NAME AND DOCUMENT	Γ#)
<i>5</i> .	-	(CÔRPORATE NAME AND DOCUMENT	`#)
6.	-	(CORPORATE NAME AND DOCUMENT	T #)
SPI	ECIAI	L INSTRUCTIONS:	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT FILED

2010 MAR 10 A 10: 11 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. Project and Security Solutions, 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) California (State or country under the law of which it is incorporated) (FEI number, if applicable) 06/06/2008 perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 03/09/2010 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7 11231 SW 158th Street Miami, Florida 33157 (Principal office address) P.O. Box 9930, Glendale, CA 91226 (Current mailing address) g security systems installation and project management (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) PARACORP INCORPORATED Name: 236 EAST 6TH AVENUE Office Address: **TALLAHASSEE** Florida 32303 (City) 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.

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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	1627 S. Central Avenue	SECRETARY OF S
	Glendale, CA 91204	MALLAHASSEE. FL
ice Cha	irman:	
irector:	Dennis Hamm	
ddress:	1627 S. Central Avenue	
	Glendale, CA 91204	
rector:	Paul Burkman	
idress:	1627 S. Central Avenue	
	Glendale, CA 91204	
OFF	ICERS	
esident	Paul Burkman	
ldress:	1627 S. Central Avenue	,
	Giendale, CA 91204	
EO	Glenn Brake	
dress:	Glendale, CA 91204	
	Glendale, CA 91204	
cretary:	Ron Burkman	· · · · · · · · · · · · · · · · · · ·
dress:	1627 S. Central Avenue, Glendale, CA 91204	
asurer:	Dennis Hamm	
dress:	1627 S. Central Avenue, Glendale, CA 91204	
- :3TC	(f necessary, you may attach an addendum to the application listing additional officers (Signature of Director or Officer listed in number 12 of the application)	and/or directors.

State of California Secretary of State

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CERTIFICATE OF STATUS

2010 MAR 10 A 10:11

SECRETARY OF STATE TALLAHASSEE. FLORIDA

ENTITY NAME:

PROJECT AND SECURITY SOLUTIONS, INC.

FILE NUMBER:

C3104080

FORMATION DATE:

06/06/2008

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 14, 2010.

DEBRA BOWEN Secretary of State