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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Aron Security, Inc. dba Arrow Security	
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," or "Certificate of Good Standing" 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:	
Alexander J. Caro	
Name of Person	
Aron Security, Inc. dba Arrow Security Firm/Company	ft st
Firm/Company	le te
60 Knickerbocker Ave	T COL
Address	
Address Bohemia NY 11716	Ĭ.,
City/State and Zip code	
ajcaro@arrowsecurity.net	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Michael Vanacore at (631) 675-2430	
Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building Division of Corporations Clifton Building Division of Corporations Clifton Building Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32301	
3 \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy 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.

	•			
Arrow Security	· · · · · · · · · · · · · · · · · · ·			
(If same unavai	able in Florida, enter alternate corporate a	ame	adopted for the purpose of transacting business in Florida)	
New York		_ 3.	(PEI number, if applicable)	
(State or country	under the law of which it is incorporated)	_		
5/15/1995	4	5.	perpetual	
(Dat	c of incorporation)	-	(Duration: Year corp. will coase to exist or "perpetual")	
N/A,	· · · · · · · · · · · · · · · · · · ·			
60 Kalekarbeek	•		502, F.S., to determine penalty liability)	
60 Knickerboo	er Ave , Bohemia NY 11718 (Principal office per Ave , Bohemia NY 11716 (Current mailing	add	hess)	
60 Knickerboo	er Ave , Bohemia NY 11718 (Principal office ter Ave , Bohemia NY 11718 (Current mailing) Security Service	add	hess)	
60 Knickerbook Provide Private (Purpose) Name and street	er Ave , Bohemia NY 11718 (Principal office ter Ave , Bohemia NY 11716 (Current mailing) Security Service a) of corporation authorized in home state of staddress of Florida registered agent:	add	bress) D. Box NOT acceptable)	
60 Knickerbook Provide Private (Purpose)	er Ave , Bohemia NY 11718 (Principal office our Ave , Bohemia NY 11716 (Current mailing a Security Service as) of corporation authorized in home state of	add	bress) Description of Florida ASSE	
60 Knickerbood Provide Private (Purpose) Name and stree	Principal office (Principal office (Principal office (Principal office (Principal office (Principal office (Current mailing	add	bress) bress) country to be carried out in state of Florida) C. Box NOT acceptable)	

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.

X William Marchell H (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.

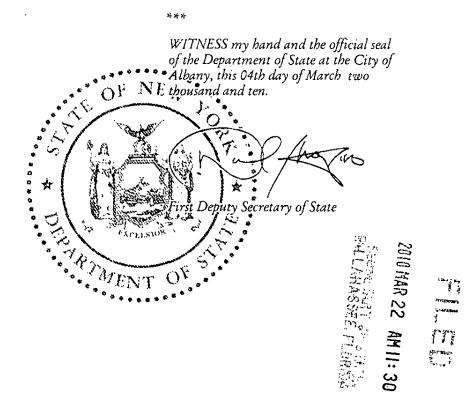
12. Names and business addresses of officers and/or directors:

A. DIRECTORS		
Chairman: Alexander J. Caro		
Address: 60 Knickerbocker Ave , Bohemia NY 11716		
Vice Chairman:		
Address:		
Director:		
Address:		
Director:		
Address:		
	Z20	
B. OFFICERS	ID HAR 2	
President:	22 / \$%£€	Standings 1
Address:		177
		The equation
Vice President: William T. Marshall	<u> </u>	. <u></u>
Address: 6582 Eureka Springs Rd ste 222 Tampa Florida 33610		
6582 Eureka Springs Rd ste 222 Tampa Florida 33610		
Secretary:		
Address:		
Treasurer:		· • · • · • · • · • · • · • · • · · · ·
Address:		<u> </u>
NOTE: If necessary you may attach an addendum to the application listing additional offi		
(Signature of Director or Officer listed in number 12 of the application	on)	
4. Alexander J. Caro		
(Typed or printed name and capacity of person signing application)	

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ARON SECURITY, INC. was filed on 05/15/1995, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.



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