

F12000001217

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer: Brent Leavitt

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12 MAR 29 PM 1:01

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\$30.00  
MAR 29 2012

2/29  
[Signature]

W120000011851

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Maximum Security, Inc DBA Max Alarm

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:

Brent Leavitt

Name of Person

Maximum Security Inc, DBA Max Alarm

Firm/Company

4928 Pleasant View Drive

Address

Chubbuck/IDAHO 83202

City/State and Zip code

Maximumsecurityinc@msn.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRENT LEAVITT

Name of Person

at ( 208 ) 760-9416

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

February 29, 2012

BRENT LEAVITT

4928 PLEASANT VIEW DR

CHUBBUCK, ID 83202

SUBJECT: MAXIMUM SECURITY, INC DBA MAX ALARM

Ref. Number: W12000011851

We have received your document for MAXIMUM SECURITY, INC DBA MAX ALARM, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as

Follows: Filings Fees: \$35.00

Registered Agent

Designation \$35.00

Certified Copy \$8.75

Certificate of Status \$8.75

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12 MAR 12 PM 12:58  
DIVISION OF CORPORATIONS

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office. Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason

Regulatory Specialist II

Letter Number: 712A00008250

**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. Maximum Security, Inc. ~~XXXXXXXXXX~~

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

**MAX ALARM**

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Idaho

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

3. 20-1883435

(FEI number, if applicable)

4. 11-4-2004

(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. 4928 Pleasant view Drive, Chubbuck ID 83202

(Principal office address)

4928 Pleasant view Drive, Chubbuck ID 83202

(Current mailing address)

8. Burglar alarm sales and installations

(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: Sydney Umah

Office Address: 515 Boston Ave

Orlando

(City)

, Florida 32805

(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)

2/21/12

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 MAR 19 PM 1:01  
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FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Brent Leavitt

Address: 4928 Pleasantview drive

Chubbuck ID, 83202

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Brent Leavitt

Address: 4928 Pleasantview Drive

Chubbuck, ID 83202

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

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

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in S.817.155, P.S.

14. \_\_\_\_\_

BRENT R. LEAVITT

(Typed or printed name and capacity of person signing application)

# ***State of Idaho***

Office of the Secretary of State

## **CERTIFICATE OF EXISTENCE**

OF

**MAXIMUM SECURITY, INC.**

File Number C-157364

12 MAR 19 PM 1:01  
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STATE OF IDAHO  
SECRETARY OF STATE

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that I am the custodian of the corporation records of this State.

I FURTHER CERTIFY That the records of this office show that the above-named corporation was incorporated under the laws of Idaho on 11/17/2004.

I FURTHER CERTIFY That the corporation is in goodstanding on the records of this office.

Dated: 2/21/2012 7:38 AM



*Ben Yursa*

SECRETARY OF STATE