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COVER LETTER

TO:	Registration Section Division of Corpora						
SUBJ	ECT: North Amer	rican Security, In	c.				
5020				- must	include suffix		
Dear S	ir or Madam:				•		
"Certif	edosed "Application icate of Existence," referenced foreign co	or "Certificate of	Good Stand	ding" a	nd check are sub		
Please	return all correspond	dence concerning	his matter	to the t	ollowing:		
Kim J	ackson c/o Art Lop	ez					
			Name of P	erson			
North	American Security	<u>,</u> Inc.					
			Firm/Comp	oany			
550 E.	Carson Plaza Dr, S	uite 222					
			Addres	SS			
Carson	n, CA 90746						
		C	ity/State an	d Zip o	ode		···
kim@r	nasi-pi.com	· · · · · · · · · · · · · · · · · · ·					
	1	E-mail address: (to	be used for	or futur	e annual report	notific	ation)
For fur	ther information con	cerning this matte	r, please ca	all:			
Kim Ja	ackson	at (323)	599-3731		
	Name of Person	(Area Code	_/	Daytime Telep	hone N	Number
Enclos	STREET/COURING Registration Section Division of Corport Clifton Building 2661 Executive Certallahassee, FL 32 ed is a check for the	n ations nter Circle 301	:		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orpora 7	tions
IX \$70	0.00 Filing Fee	\$78.75 Filing Fe Certificate of St			5 Filing Fee & ied Copy		687.50 Filing Fee, Certificate of Status & Certified Conv

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.	North Ameri	can Security, Inc.				
		orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D,"	"COMPANY," "CORPORATION,"		
	dba	NAS, Inc.				
	(If name unavaila	able in Florida, enter alternate corporate nan	ne a	dopted for the purpose of transacting business in Florida)		
2.	California		3.	95-4502871	_	
	(State or countr	y under the law of which it is incorporated)		(FEI number, if applicable)		
4.	9/27/1994		5.	Perpetual		
	(Date	of incorporation)		(Date of duration, if other than perpetual)		
6.	no business h	nas been conducted to date			_	
		· ·		Florida, if prior to registration)		
				02, F.S., to determine penalty liability)		
7.	7. 550 E. Carson Plaza Dr. Suite 222, Carson, CA 90746					
		(Prin	сір	al office address)		
	Same as above					
		(Current ma	illin	g address, if different)		
8.	Name and stree	et address of Florida registered agent: (P.O	Box NOT acceptable)		
	Name:	Corporation Service Company		=		
o	ffice Address:	1201 Hays St		28 A ASSEE		
		Tallahassee			<u> </u>	
	•	(City)		(Zip code)		
9.	Registered age	ent's acceptance:		DA SA		

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.

Meghan B. Newberry Assistant Vice President

Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	· · · · · · · · · · · · · · · · · · ·
Address:	
Director:	
Address:	
B. OFFICERS	
President: Arthur Lopez	e Žtori — <u>—</u>
Address: 550 E. Carson Plaza Dr. Suite 222 Carson, CA 90746	설용 5
Vice President: Kenneth Hillman	Since the second
Address: 550 E. Carson Plaza Dr. Suite 222 Carson, CA 90746	1
	意 高 6
Secretary: Kenneth Hillman	
Address: 550 E. Carson Plaza Dr. Suite 222 Carson, CA 90746	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional	al officers and/or directors.
12.	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) a are true and that he or she is aware that false information submitted in a document to t a third degree felony as provided for in s.817.155, F.S.	
13 Arthur Lopez	

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

NORTH AMERICAN SECURITY, INCORPORATED

FILE NUMBER:

C1751329

FORMATION DATE:

09/27/1994

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, 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 June 19, 2015.

AUEX PADILLA Secretary of State