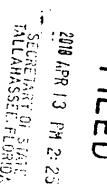
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PICK-UP	☐ WAIT	MAIL
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Office Use Only

COVER LETTER

то:	Registration S Division of Co					
SUBJ		•	SECURITY, IN	C		
SUDJ	EC1:	Name o	of corporation	- must i	netude suffix	
Dear S	ir or Madam:					
"Certif	ficate of Exister	- ~	of Good Star	nding" a	nd check are sub	et Business in Florida." omitted to register the
	return all corre. LDINE CONTRI	spondence concerni ERAS	ing this matter	r to the f	following:	
			Name of	Person		
GENE	RAL SECURITY	. INC				
			Firm/Com	ipany		
100 FA	AIRCHILD AVE	NUE				
			Addre	288		
PLAIN	VIEW, NY 1180	03				
			City/State a	nd Zip c	ode	
gerry.c	ontreras@genera	lcompanies.com				
		E-mail address	: (to be used	for futur	e annual report i	notification)
For fur	rther informatio	n concerning this n	atter, please o	eall:		
GERA	LDINE CONTRI	ERAS	516	414-	4125	
	Name of Pers	on	Area Cod	<i>)</i>	Daytime Telep	hone Number
	Registration S Division of Co Clifton Buildi	orporations ng /e Center Circle	S:		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7
Enclos	sed is a check fo	r the following amo	ount;			
5 70	0.00 Filing Fee	S78.75 Filin Certificate of			5 Filing Fee & ied Copy	S87.50 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.

"Inc.," "Co.," "C	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.") able in Florida, enter alternate corporate nan		
NEW YORK		11-2712674	
(State or count			
(Dat 4/1/2018	e of incorporation)	(Date of duration, if othe	r than perpetual)
100 CAID CHII	(SEE SECTIONS 607.1501 & 607	s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liabi	dity)
	(SEE SECTIONS 607.1501 & 607 D AVENUE, PLAINVIEW, NY 11803		dity)
	(SEE SECTIONS 607.1501 & 607 D AVENUE, PLAINVIEW, NY 11803 (Prin	7.1502, F.S., to determine penalty liability liability office address)	
. Name and stre	(SEE SECTIONS 607.1501 & 607 D AVENUE, PLAINVIEW, NY 11803 (Prin	7.1502, F.S., to determine penalty liability liability and selection of the address of the selection of the	2018 APR 13 PM SECRETARY ST TALLAHASSEC FL
3. Name and stre	(SEE SECTIONS 607.1501 & 607 D AVENUE, PLAINVIEW, NY 11803 (Prin (Current ma et address of Florida registered agent: (EDWARD M MINICOZZI 13860 WELLINTON TRACE, SUITE 3 WELLINGTON	7.1502, F.S., to determine penalty liability liability and selection of the address of the selection of the	SECRE IAN'S FALLAHASSE

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.

Edward M Minicozzi Jr.	
 (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: Address: Address: ____ B. OFFICERS EDWARD M MINICOZZI JR. 100 FAIRCHILD AVENUE, PLAINVIEW, NY 11803 Address: PATRICIA MINICOZZI Vice President: 100 FAIRCHILD AVENUE, PLAINVIEW, NY 11803 Address: _____ EDWARD MINICOZZI Secretary: 100 FAIRCHILD AVENUE, PLAINVIEW, NY 11803 Address: _ PATRICIA MINICOZZI Treasurer: 100 FAIRCHILD AVENUE, PLAINVIEW, NY 11803 Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Edward M Minicozzi Jr. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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, F.S. EDWARD M MINICOZZI JR.

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of GENERAL SECURITY, INC. was filed on 03/16/1984, under the name of EARLY WARNING ALARM CORP., 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. I further certify the following:

A certificate changing name to SENTRY EARLY WARNING SYSTEMS, INC. was filed on 12/26/1984.

A Certificate of Merger was filed on 06/29/1989.

Certificate of Change was filed on 12/28/1992.

A Biennial Statement was filed 05/13/1993: "

A Biennial Statement was filed 05/16/1994.

A Biennial Statement was filed 03/17/1998.

A Certificate of Merger and Name Change, changing its name to GENERAL SECURITY, INC. was filed on 06/24/1999:

A Biennial Statement was filed 05/15/2000.

A Biennial Statement was filed 03/27/2002.

A Biennial Statement was filed 03/29/2004.

A Biennial Statement was filed 03/30/2006.

A Biennial Statement was filed 03/11/2008.

A Biennial Statement was filed 04/22/2010.

A Biennial Statement was filed 04/30/2012.

A Biennial Statement was filed 12/02/2014.

A Biennial Statement was filed 10/20/2016.

I further certify that no other documents have been filed by such corporation.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 01st day of February two thousand and eighteen.

Brendan W. Fitzgerald Executive Deputy Secretary of State