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SECRETARY OF STATE

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* COVER LETTER

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	stration Section sion of Corporations			
SUBJECT	DSS MONITORING CORI	P.		
SOBJECT		e of corporation -	must include suffix	
Dear Sir or N	Madam:			
"Certificate	d "Application by Foreign C of Existence," or "Certifica need foreign corporation to	te of Good Stand	ing" and check are subt	t Business in Florida," nitted to register the
Please return	ı all correspondence concer	ning this matter	to the following:	
BRIAN SPIN	NER			207 SE
		Name of P	erson	1 S
Please return all correspondence concerning this matter to the following: BRIAN SPINNER Name of Person BSS MONITORING CORP. Firm/Company 60 BETHPAGE ROAD Address HICKSVILLE, NEW YORK 11801 City/State and Zip code brian.spinner@sentryprotectsyou.com				JAN 27
		Firm/Comp	pany	() The second
60 BETHPA	GE ROAD			OF S
·		Addre	SS	2: 2 5: 7/1 FL
HICKSVILL	E, NEW YORK 11801			, E. 6
		City/State an	d Zip code	
brian.spinner	-		<u> </u>	
	E-mail addre	ess: (to be used fo	or future annual report n	otification)
For further i	nformation concerning this	matter, please ca	all:	
BRIAN SPI	NNER	516 at (523-4081	
Nai	me of Person	Area Code	Daytime Telepl	hone Number
Reg Div The 241	REET/COURIER ADDRE distration Section ision of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 8 lahassee, FL 32303		MAILING A Registration S Division of Co P.O. Box 6321 Tallahassee, F	ection orporations 7
Enclosed is Please make ☐ \$70.00 F	C	DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified 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.

(If name unavails	ible in Florida, enter alternate corporate na	me adapted for the nurroce of transactin	a business in Florid	<u> </u>
NEW YORK				и,
(State or country	y under the law of which it is incorporated	3. 65-1201948 (FEI number, if ap	plicable)	
HH V 30, 2003				
(Date of incorporation)		(Date of duration, if other than perpetual)		
NO BUSINESS	TRANSACTED AT TIME OF APPLICA (Date first transacted busine	TION		
	ROAD, HICKSVILLE, NEW YORK 1180	7.1302, 1.3., to determine penarty habiti	JAN 27	1
	(ттера	office <u>street</u> address)	1. CE	
Name and stree	(Current ma t address of Florida registered agent: (niling address, if different) P.O. Box, NOT acceptable)	PH 2: 29	
Name:	STEVEN SPINNER			
fice Address:	4091 NORTHWEST 58TH STREET			
	BOCA RATON	, Florida <u>33496</u>		
	(City)	(Zip code)		
aving been nam signated in this rther agree to co	ent's acceptance: ed as registered agent and to accept so application, I hereby accept the appoi omply with the provisions of all statuto with and accept the obligations of my	intment as registered agent and agre es relative to the proper and complet	e to act in this ca	pacity.

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.

A. DIRECTORS BRIAN SPINNER □Chairman Name: _____ Chairman Name: Address: 2323 HALYARD DRIVE □Vice Chairman Address: _____ □Viçe Chairman MERRICK, NY 11566 □ Director □ Director President □President □Vice President □ Vice President □ Secretary Treasurer □ Secretary □ Treasurer □Other _____ □Other _____ □Other _____ Other _____ Name: ___ ELAINE SPINNER □ Chairman □ Chairman 39 HELEN AVENUE Address: ■ Vice Chairman □ Vice Chairman Address: _____ MERRICK, NY 11566 □ Director Director □President □President ■Vice President □ Vice President Treasurer ■ Secretary ☐ Secretary □Other _____ Other_____ □Other ___ □ Chairman □Chairman Name: Name: _____ □Vice Chairman Address: ☐ Vice Chairman Address: Director □ Director □President □President □Vice President _____ □ Vice President □ Secretary ☐ Treasurer □Treasurer ☐ Secretary Other □Other _____ □Other ______ ☐ Other _____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may he added to the ordex when filing your Florida Department of State Annual Report form. 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.

BRIAN SPINNER

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of BSS MONITORING CORP. was filed on 07/30/2003, 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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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 22nd day of January two thousand and twenty-one.

Brandon C. Hughan

Brendan C Hughes
Executive Deputy Secretary of State