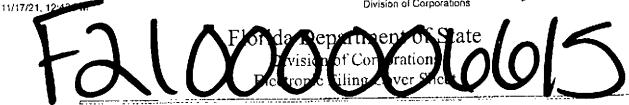
Division of Corporations

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : API PROCESSING

Account Number : I20110000069 Phone : (954)567-0013 Fax Number : (954)567-3401

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: kathy@apiprocessing.com

FOREIGN PROFIT/NONPROFIT CORPORATION

Safeguard Security and Surveillance Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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Help

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## 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.

		Safeguard Security and Su	the first terminal and the second		· · · - · · -				
•	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc.," "Co.," "Corp.")								
	(If name unavails	able in Florido, enter alternate corporate name at		isiucss i	n Flori	Úz)			
7	Connecticut 3		20-8617517						
٤.	(State or countr	y under the law of which it is incorporated)	(FEI number, if applie	able)	2				
	•	. C 25 2007	Perpetual		سپېد				
4.	(Date	may 23, 2007 5	(Date of duration, if other than perpen						
	`	,			_	Г			
6.		(Date first transacted business in (SEE SECTIONS 607,1501 & 607,150	2, F.S., to determine penalty liability)		=				
7	1 Corporate Drive, Windson Locks, CT 06096				9-1-2	<b></b>			
•	(Principal office street suchess)								
		1 Corporate Drive, Windsor Locks, CT 06096							
		(Current mailing	address, if different)						
	Name and <u>strex</u> Name: office Address:	et uddress of Florida registered agent: (P.O. Joshua Pemberton  10109 Somersby Drive  Riverview							
		(City)	(Zip code)						

9. 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 us registered agent.

[Registered agent migualure]

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.

<sup>11.</sup> For initial indexing purposes, list names, titles and althresco of the primary officers and/or directors (up to six (6) total):

KO.986 #003

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A. DIRECTORS								
- Cutiman	Mark Therisque Name:	III Chairman	Name:	The second secon				
∐Vice Chairman	Address:	□Vice Chairman	Address:	A seminar commission of the literature of the seminar of the semin				
Director	Windsor Locks, CT 06096	□ Director	and species of the A.					
President	The second of th	President	مورسانسان فالانتشابات رامي	And the track of the contract the contract that				
□Vice President	And the second recording to the Conference of th	☐ Vice President						
☐Sccretary	☐Tressurer	∐Ѕ <del>сстеосту</del>		☐Treasurer				
	Other	Other	magakawa V 1996P	Other				
☐ Chairman	Name:	[]Chairman	Name:					
☐ Vice Chainman	Address:	OVice Chairman	Address:					
☐Director	And the state of t	□Director	المراجعة المستعدد					
ÖPresi <b>den</b> t	and the second of the second o	□President.						
□Vice President	The state of the second	□Vice President		The state of the s				
☐Secretary	[]Treasurer	Secretary		Tressurer				
□ Other	[]Coher	[]Other	mudharren de <del>um</del>	DОФ				
El Chairman	Name:	□ Chairman	Name:					
☐Vice Chairman	Address:	☐ Vice Chairman	Address:					
□ Director	the second section of the section	Director	<b>*</b> 1 <b>*</b> 1	and the second s				
☐President	Part of the second seco	□Precident						
☐Vice President	The state of the s	□Vice President	:	<u> </u>				
☐Sccretary	[] Tressurer	□ Secretary		□ (ressurer				
□Other	□Other	□Other		☐ Other				
Important Notice: Use an attachment to report more than six (6). The effectiveness will be imaged for reporting purposes only. Non-indexed individuals may be added to the lidex when filters our Florida Department of State Annual Report form.  12.    Signature of Director or Officer.								
12.	Signature of Director of	r Officer						
The officer or director signing this document (and who is listed in number 11 above) affurns that the facts stated herein are true and that he or the is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a.817.155, F.S.								
13.	Mark Theriaque, President (Typed or printed name and consulty of person	i ng signing application	n)	renditariumite musikaliana anna magasana.				
	Callines on brancon mines and ambanary on hanne	~ ~						

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HO.996 #004

## Secretary of the State of Connecticut Certificate of Legal Existence

**Express Certificate** 

Date Issued: November 15, 2021

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of incorporation for the below domestic Stock corporation was filed in this office.

A certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far, as indicated by the records of this office, such corporation is in existence.

**Business Details** 

Business Name #SAFEGUARD SECURITY AND SURVEILLANCE INC

Business ALEI # US-CT/BER:0901300

Formation Date 605/25/2007

Secretary of the State

Business ALEI: US-CT.BER:0901300

Note: To verify this certificate, visit Business.ct.gov

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Certificate Number: C-00015552