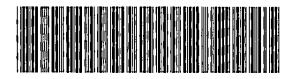
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(Req	uestor's Name)	
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S. FRANKLIN JUN 2 1 2022

### **COVER LETTER**

_	tration Section ion of Corporations			
SUBJECT:	Aegis Security & Invest	igations Corporation		
SOBJECT.	Na	me of corporation -	· must include suffix	
Dear Sir or M	adam:			
"Certificate o		cate of Good Stand	authorization to Transact ing" and check are subm s in Florida.	
Please return all correspondence concerning this matter to the following:				
Jim Summervi	lle			P
		Name of P	erson	
Aegis Security & Investigations				
		Firm/Comp	pany	
114 Bliss St				
		Addres	SS	
Westfield NY	14787			
		City/State an	d Zip code	
summervillese	rvices@gmail.com			
	E-mail add	dress: (to be used for	or future annual report no	tification)
For further in	formation concerning th	nis matter, please ca	ill:	
James		716 at (	4811345	
Nam	e of Person	Area Code	Daytime Telepho	one Number
Regis Divis The C 2415	EET/COURIER ADD stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite hassee, FL 32303		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
		A DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 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.

(FEI number, if applicable)  (Date of duration, if other than perpetual)  da, if prior to registration)  S., to determine penalty liability)  et address)  ess, if different)
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ess, if different)
NOT acceptable)
NOT acceptable)
2
Florida 33755 (Zip code)
NOT acceptable)

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						
□ Chairman	James Summerville Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	Westfield NY 14787	□Director				
■ President		□President				
□Vice President		□Vice President				
■ Secretary	Treasurer	□Secretary		□Treasurer	:	
Other	Other	Other		□Other		
□Chainnan	Name:	□Chairman	Name;			
		□Vice Chairman				
	Address:		Address:			
□Director		□Director				
□President	<del></del>	□President				
□ Vice President	<u>,                                      </u>	□Vice President			7 <del>0</del> 22	
☐ Secretary	□Treasurer	☐ Secretary		Treasurer	. I	: }
□Other	□Other	□Other		□Other	23	
					PS	- 1
□Chairman	Name:	□Chairman	Name:	<del></del>	=	ار. 
□Vice Chairman	Address:	□Vice Chairman	Address:		2	
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	□Secretary		□Treasure	r	
☐Other	Other	□Other		□Other		
Important Notice: Individuals may be	Use an attachment to report more than six (6). The attachment to did added to the index when filling your Horida Department Signature of Director of	nt of State Annual Re	d for reporting purport form.	rposes only.	Non-inde	exed
	ctor signing this document (and who is listed in number else information submitted in a document to the Departr	ment of State constitu				
13.	(Typed or printed name and capacity of perso	icc. dent	)			

#### STATE OF NEW YORK

#### DEPARTMENT OF STATE

#### Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: AEGIS SECURITY & INVESTIGATIONS CORPORATION

DOS ID Number: 6487524

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 05/17/2022

Statement Status: CURRENT Statement Due Date: 05/31/2024

2002 FEY 23 PM II: 22

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on May 17, 2022 at 05:40 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Hugha

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100001580768 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <a href="http://ecorp.dos.ny.gov">http://ecorp.dos.ny.gov</a>