# F2300006569

(Requestor's Name)						
(Address)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Dusiness Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
į						
W23000 151129						

Office Use Only



700418156257

10/30/23--01041--003 \*\*87.50

823 NOV 20 PH 4: 33



November 6, 2023

RICHARD M. REED 81 KASHMIR TRAIL PALM COAST, FL 32164 US

SUBJECT: REED SECURITY SYSTEMS, INC.

Ref. Number: W23000151129

We have received your document for REED SECURITY SYSTEMS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation. - O . SAANUL

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Andrea Andrews Regulatory Specialist II

Letter Number: 123A00025797

RECEIVED

### **COVER LETTER**

	stration Section ion of Corporations					
SURIFCT	REED SECURITY SYSTEM	S, INC.				
SOBBET.	Name o	of corporation	- must include suffix			
Dear Sir or M						
"Certificate o	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to tr	of Good Stan	ding" and check are subn			
Please return	all correspondence concerni	ng this matter	to the following:			
RICHARD M.	REED					
		Name of 1	Person			
REED SECUE	RITY SYSTEMS, INC.					
		Firm/Com	pany			
81 KASHMIR	TRAIL					
***		Addro	ess			
PALM COAS	T FLORIDA 32164					
		City/State a	nd Zip code			
RICHARDRE	ED@REEDSYS.US					
	E-mail address	: (to be used f	or future annual report no	otification)		
For further in	formation concerning this m	atter, please c	all:			
RICHARD RE	EED	410 at (	de Daytime Telephone Number			
Nam	e of Person	Area Code	Daytime Teleph	one Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	check for the following amoneck payable to: FLORIDA DI ing Fee	EPARTMENT g Fee & E	OF STATE.  3 \$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.

1.	TY SYSTEMS, INC. corporation; must include "INCORPORATED	" "COMPANY" "COPPORATIO	NI "				
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")	. COMPANT, CORPORATIO	uv,				
(If name unavail	able in Florida, enter alternate cornorate name	and appeal for the purpose of transport	Luci	i= Eleci	-la)		
DELAWADE	lable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  3. 541561683						
2	ry under the law of which it is incorporated)	(FEI number, if applicable)					
1000		,					
(Date of incorporation)		(Date of duration, if other than perpetual)					
6							
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 502. F.S., to determine penalty liahi	lity)				
, 81 KASHMIR TI	RAL PALM COAST FLORIDA 32164	,,	, ,				
/		fice street address)					
PO BOX 2579 S	ALISBURY MARYLAND 21802						
<del></del>	(Current maili	ng address, if different)					
8. Name and street	et address of Florida registered agent: (P.	O. Box NOT acceptable)		20			
Name:	RICHARD M REED			2023 NOV	'at M		
Office Address:	81 KASHMIR TRAIL			7 V O	<u> </u>		
	DALM COAST	22161	, <del>-</del>	20			
	PALM COAST	, Florida <u>32164</u> (Zip code)	:	PM 4: 33			
	(City)	(Zip code)	· · ·	<del>:.</del>			
	ent's acceptance:		•-	ဒ္ဒ			
Having been nam	ned as registered agent and to accept serv	ice of process for the above state	d corporal	tion at i	he pla		
uesignuieu in inis further agree to c	application, I hereby accept the appoint omply with the provisions of all statutes	ment as registered agent and agr relative to the proper and comple	ee to act ii ete perforn	n this ci iance o	apacit f mv a		
and I am familiar	with and accept the obligations of my pe	osition as registered agent.	<b>,</b>	,	,,		
	RU2	$\mathcal{L}$					
	(Registered agent's s	signature)	<del></del>				
10. Attached is a	certificate of existence duly authenticated		clivery of	this ann	licatio		

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdic

#### 'As DIRECTORS' RICHARD M. REED □ Chairman □ Chairman Name: 81 KASHMIR TRAIL □Vice Chairman Address: □ Vice Chairman Address: PALM COAST FLORIDA 32164 □ Director Director President □President □ Vice President \_\_\_ □ Vice President Secretary Treasurer □ Secretary □Treasurer □ Other \_\_\_\_\_ □Other \_\_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ ☐ Chairman Name: \_\_\_\_\_ □Chairman Name: □ Vice Chairman Address: \_\_\_\_\_ □ Vice Chairman Address: □ Director □ Director □ President President ☐ Vice President \_\_\_\_\_ ☐ Vice President ☐ Secretary □ Treasurer □ Secretary ☐Treasurer □Other \_\_\_\_\_ □Other □Other \_\_\_\_\_ □Other \_\_\_\_\_ □ Chairman Name: \_\_\_\_\_ □ Chairman □Vice Chairman Address: □ Vice Chairman Address: □ Director □ Director □ President □ President □ Vice President □ Vice President □ Secretary ☐ Treasurer ☐ Secretary ☐ Treasurer □Other \_\_\_\_\_ □ Other \_\_\_\_\_ Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-index individuals may be added to the index when filing your Florida Department of State Annual Report form.

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 she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for s.817.155, F.S.

RICHARD M. REED PRESIDENT

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "REED SECURITY SYSTEMS, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF OCTOBER, A.D.

2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REED SECURITY SYSTEMS, INC." WAS INCORPORATED ON THE THIRD DAY OF MAY, A.D. 1990.

Authentication: 204447539

Date: 10-25-23