7600000 4816

TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION **DIVISION OF CORPORATIONS**

SUBJECT: ENFORCEMENT PROTECTIVE CORP (EP)
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JOHN F. KENNELY (Name of Person) ENFORCEMENT PROTECTIVE CORP.

(Firm/Company)

1960 OAKLEAF LAWE

(Address) LITLIA SPRINGS, GA 30057
(City, State and Zip Code)

Should you need, to call someone concerning this matter, please call:

(Name of Person)

Area Code & Daytime Telephone Number

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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. ENFORCEMENT PROTES CTIVE (Name of corporation: must include the word "INCORPORATIO", "Coabbreviations of like import in language as will clearly indicate that it is	E CORPORATION		
(Name of corporation: must include the word "INCORPORATIO", "Cabbreviations of like import in language as will clearly indicate that it is person or partnership if not so contained in the name at present.)	a corporation instead of a natural		
2. GEORGIA USA (State or country under the law of which it is incorporated) 3. 55	7-2956402-211106-3-2 (FEI number, if applicable)		
4. Supering (Date of Incorporation) 5. (Duration)	PERPETURE in: Year corp. will cease to exist or "perpetual")		
6. WE HAVE NOT YET TRANSACTED MYY (Date first transacted business in Florida, (SEE SECTIONS 607.1501,	3USYNESS IN FLORINA 607.1502, AND 817.155, F.S.)		
1. ENFORCEMENT PROTECTIVE C			
4066 SILVER STAR RC ORD (Current mailing address)	PANDO, FL. 32808		
8. A PRIVATE SECURITY AGENCY PER CHAPTER 493 F. (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)			
 Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) 			
Name: Mr Alaw Dota	DIVISI 96 S		
Office Address: 4694 NOATH LANG	EP 18		
**ORLANDO ,FI	orida , <u>32808</u> = 350		
10. McBisteren ubent 3 neceptameer	그 분석		
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.			
(Registered agent's signature			

i2. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)
A. DIRECTORS (Street address only- P. O . Box NOT acceptable)
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS (Street address only- P. O. Box NOT acceptable)
President: JOHN F. KENNENY
Address: 4066 SILVER Star Rd
OR (ANDO, FL 32808
Vice President: SOHN F. KENNED JT 1TF
Address: 4066 SILVER STAR Rd
OKLANDO, FL 32808
Secretary: JOHN F. KENNEDY
Address: HOBB SI/VER STAR Rd
OKLANDO, FL 32808
Treasurer: SOHWF. KENNEDY
Address: 4066 SILVER STAR Rd, ORLAND FL 32808
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. JOHN F. KENNEDY PRESIDENT (Typed or printed name and capacity of person signing application)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	ENFORCEMENT PROTECTIVE CORP
2.	The name and address of the reg	istered agent and office is:
	Mr. Alx	NAME) (NAME)
		NORTH JAME Box or Mail Drop Box NOT ACCEPTABLE)
	ORLAN	NO, FL 32708

Having been named as registered agent and to occept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

.Secretary of State Business Information and Services Suite 315, West Tomer 2 Martin Cuther King Ir. Ar. Atlanta, Georgia 30334-1530

1 961910283 DOCKET NUMBER CONTROL NUMBER : 9319806 DATE INC/AUTH/FILED: 08/24/1993 : GEORGIA JURISDICTION 1 07/09/1996 PRINT DATE FORM NUMBER : 211

J F KENNEDY 1960 OAKLEAF LANE LITHIA SPRINGS GA 30057

CERTIFICATE OF EXISTENCE

I, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

ENFORCEMENT PROTECTIVE CORPORATION A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

SECRETARY OF STATE

