

F98000000354

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Termark Security Systems, Inc.
(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:

Murray E. Shepard, Esq.
(Name of Person)

Shepard, Leskan + Levine, PA
(Firm/Company)

409 SE 7th Street
(Address)

Ft. Lauderdale, FL 33301
(City/State/Zip)

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-01/02/98-01085-002

*****70.00 *****70.00

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

Murray Shepard at (954) 467-8660
(Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

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

MAILING ADDRESS:

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

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DIVISION OF CORPORATIONS
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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:**

1. TERMARK SECURITY SYSTEMS, INC.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. WYOMING

(State or country under the law of which it is incorporated)

3. _____
(FEI number, if applicable)

4. AUGUST 1, 1995

(Date of Incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 1919 CENTRAL AVENUE

CHEYENNE, WYOMING 82001

(Current mailing address)

8. SYSTEMS CONTRACTOR/CONSULTANT AND ANY OTHER LAWFUL PURPOSE

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. **Name and street address of Florida registered agent:**

Name: MURRAY E SHEPARD, ESQUIRE

Office Address: 409 SOUTHEAST 7th STREET

FORT LAUDERDALE

, Florida , 33301

(Zip Code)

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10. **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 as registered agent.

(Registered agent's signature)

11. 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.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: TERRY L. MRAKOVICH, CPPAddress: 1919 CENTRAL AVENUE
CHEYENNE, WYOMING 82001

Vice Chairman: _____

Address: _____

Director: BETTY L. MRAKOVICHAddress: 1919 CENTRAL AVENUE
CHEYENNE, WYOMING 82001

Director: _____

Address: _____

B. OFFICERS

President: TERRY L. MRAKOVICH, CPPAddress: 1919 CENTRAL AVENUE,
CHEYENNE, WYOMING 82001Vice President: NONE

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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)

TERRY L. MRAKOVICH, CPP: CHAIRMAN AND PRESIDENT

14.

(Typed or printed name and capacity of person signing application)

State of Wyoming

Office of the Secretary of State



United States of America,
State of Wyoming } ss.

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I, DIANA J. OHMAN, Secretary of State of the State of Wyoming, do hereby certify that according to the records in the office of the Secretary of State of Wyoming, **TERMARK SECURITY SYSTEMS, INC.** is a corporation organized under the laws of the State of Wyoming, whose date of incorporation is 08/01/1995; and whose period of duration is PERPETUAL.

I FURTHER CERTIFY that this corporation has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and that Articles of Dissolution have not been filed, thus making the corporation in existence in the State of Wyoming.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 4th day of November A.D., 1997.



Diana J. Ohman
Secretary of State

By *[Signature]*