

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000228005 3)))



H240002280053ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : 120220000070 : (888)462-3453 : (877)919-2613 Fax Number

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

Email Address: EFILE1234@INCFILE.COM

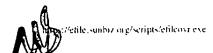
### Foreign Limited Liability Company **CUSTOM SECURITY GROUP LLC**

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help



(((H24000228005 3)))

COVER LETTER		
TO: Registration Section Division of Corporations		
SUBJECT: CUSTOM SECURITY GROUP LLC		
Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifica Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
LOVETTE DOBSON		
Name of Person		
Firm/Company		
· ····································		
17350 STATE HWY 249 STE 220		
Address		
HOUSTON, TX 77064		
City/State and Zip Code		
FEU FACCA CINICEU F COM		
EFILE 1234@INCFILE.COM  E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
LOVETTE DOBSON at (1) 888-462-3453  Name of Contact Person Area Code Daytime Telephone Number		
Name of Contact Person Area Code Daytime Telephone Number		
Mailing Address: Street Address:		
Registration Section Registration Section		
Division of Corporations  Division of Corporations  The Corporations		
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810		
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE		

□ \$125.00 Filing Fee \$\$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate

Certified Copy

Certificate of Status

of Status & Certified Copy

(((H24000228005 3)))

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	TION 605,0802, FLORIDA STATUTES. THE FOI SINESS IN THE STATE OF FLORIDA:	LOMING IS SUBMITTED TO REGISTER A FORE	KGN TAMITED LABILA
1. (Name of Foreign I	CUSTOM SECURITY GR	COUPLLC Liability Company," "L.L.C.," or "L.L.C.")	
If name imavailable, enter alternate n	ame adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited Liability Compa	nv." "L.l. C." or "LLC.")
Texas Ourisdaction under the law of wh	iich foreign limited habilits company is organized)	3. 84-3681308 IFEI number, il applicate	eı
i	(Date first transacted business in Florida, if prior to re	gistralien)	
1150 Nw 72n	(Date first transacted business in Florida, i) prior to re issee sections 605 0904 & 605 0905, E.S. to determine d. Ave Tower 1	6. 1150 Nw 72nd Ave To	ower 1
Ste 455 #1702	26	Ste 455 #17026	
Miami, FL 33	126	Miami, FL 33126	
. Name and street address	s of Florida registered agent; (P.O. Box)	NOT acceptable)	2024
Name:	REPUBLIC REGISTERE	ED AGENT LLC	5- THC +7nz
Office Address:	1150 Nw 72nd Ave To	<u>wer 1 S</u> te 455	<del>1</del> 9
	Miami	. Florida 33126	12: 09
lesignated in this applicat o comply with the provision	gistered agent and to accept service of pr ion, I hereby accept the appointment as	ocess for the above stated limited liability coregistered agent and agree to act in this capind complete performance of my duties, and	acity. I further agri
	Lovette D	obson	

#### (((H24000228005 3)))

(((H24000228005 3)))

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity; Name and Address: Name: Natalie Dabdoub □Manager Name: Address: 617 Sweet Bay Dr. **X**Member □Member Address: \_\_\_\_\_\_ Mandeville, LA 70448 ☐ Authorized □ Authorized Person Person □Other\_\_\_\_\_ []Other\_\_\_\_ **DOther\_\_\_\_\_** □Other \_\_\_\_\_ Name: □Manager □Manager □ Member Address: □Member Address: □ Authorized □Authorized Person Person □Other\_\_\_\_\_ □Other\_\_\_\_\_ COther\_\_\_ ⊡Other\_\_\_\_ **D**Manager Name. □Member Address: ☐ Member Address: □Authorized □Authorized Person Person □Other\_\_\_\_\_ □Other \_\_\_Other\_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Notalic Nubdoub

Page: 5/5 7/9/2024 94:17:09 COT

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson (((H24000228005 3)))

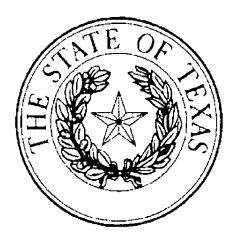
## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CUSTOM SECURITY GROUP LLC (file number 803467747), a Domestic Limited Liability Company (LLC), was filed in this office on November 12, 2019.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 02, 2024.



Phone. (512) 463-5555

Prepared by: SOS-WEB

Jane Nelson Secretary of State

(((H24000228005 3)))

Document: 1378270170002