

P000000 10097

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

100003108701--7  
-01/24/00-01119-012  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Sece Sales & Services, Inc.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Steven Barrett  
Name (Printed or typed)

633 Sharar Ave.  
Address

Opa-Locka, Florida 33054  
City, State & Zip

(305) 685-2273  
Daytime Telephone number

Namon Gilbert NO DAY  
AUTHORIZATION BY PHONE TO  
CORRECT ART II + RA desig. file address  
DATE 1/31 should be  
DOC. EXAM SHI on both 633 Sharar Ave.

S. Thompson JAN 31 2000

**ARTICLES OF INCORPORATION  
OF  
Sece Sales & Services, Inc.**

FILED  
00 JAN 24 AM 9:59  
TALLAHASSEE FLORIDA

*The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.*

- ONE:** The name of this principal corporation is Sece Sales & Services, Inc. The Corporation is organized pursuant to Chapter 607 or 621 of the Florida Statutes for profit Corporations.
- TWO:** The principal place of business and mailing address of the corporation is 633 Sharar Opa-Locka, Florida 33054 in Dade County, Florida.
- THREE:** The Corporation is authorized to have to issue Five Thousands (5,000) shares of common stock with a par value of \$1.00 per share. All stock shall be of one class. The Board of Directors may authorize the issuance of such stock to such person(s) upon such terms and for such consideration as they may deem appropriate. The consideration may consist of any tangible or intangible property or benefit to the Corporation, including cash, promissory notes, services performed, promises to perform services evidenced by a written contract, or other securities of the Corporation.
- FOUR:** The name and address of the Registered Agent is Steven Barrett 633 Sharar Avenue Opa-Locka, Florida 33054.

Having been named as registered agent and to accept 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 complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Steven Barrett

**Signature/Registered Agent**

Steven Barrett

633 Sharar Avenue

Opa-Locka, FL 33054

1-21-2006

**Date**


**FIVE:**

The Directors are elected in accordance with the Bylaws.  
The name and address of the persons appointed to act as the  
initial Directors of this corporation are:

NAME	ADDRESS
Steven Barrett President	633 Sharar Avenue Opa-Locka, FL 33054

**SIX:**

Executed on January 21, 2000. The name and address of the  
incorporator of this corporation shall be:

 (Signature)  
Steven Barrett  
633 Sharar Avenue  
Opa-Locka, FL 33054

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617,0501, 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

Sece Sales & Services, Inc.  
(must include suffix)

2. The name and address of the registered agent and office is.

Steven Barrett  
(Name)

633 Sharar Avenue  
(P.O. Box or Mail Drop Box NOT acceptable)

Opa-Locka, Florida 33054  
(City/State/Zip)

*Having been named as registered agent and to accept service of process for the above  
states 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)

1-21-2000  
(Date)

FILED  
00 JAN 24 AM 9:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA