POOCO 6 42556

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

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SUBJECT: Sc	ETT PROTECTION SYST (PROPOSED CORPORATE	ens, Inc. Ename- <u>must inclu</u>	DE SUFFIX)		
Enclosed is an original ar	nd one(1) copy of the articles	s of incorporation and a	check for :		
Filing Fee Fi	\$78.75 iling Fee c Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of		
FROM:	Timothy S. Dims	ADDITIONAL CO	Status PY REQUIRED	: بر جانب	· -
TROM.	Name (Pri		TALLANA	PR Z	,
_	Winter Haven City, S	, FL 33884 Nate & Zip	SELE FLORE	ED 2:1	
	862-401-37		Dr.	<i>n .</i> 0	

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

4-27.00

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME
The name of the corporation shall be:
Scott Protection Systems, Ind. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 130 Audubon Rd.
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
130 Auduban Rd.
Winter Haven, FL 33884
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
FOR PROFIT ORGanization to Sell and Install
Security Alarm Systems
ARTICLE IV SHARES
The number of shares of stock is: 10,000
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)
The name(s) and address(es): Timothy S. Directale, Aces.
1601 11/3 ST. WE
Winter Haven, Pl 33881
ARTICLE VI REGISTERED AGENT
The <u>name and Florida street address</u> of the registered agent is:
Timothy S. Dimsdale
1601 112 ST We
WINTER HOVEN, FL 33881
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
TimoThy S. Dimskale 1601 112 ST. Ne
Winter Hum FL 3888) *********************************

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Incorporator

Certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

| 1 | 1 | 7 | 0 |
| Date | Date