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# LAZARUS CORPORATE FILING SERVICE

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TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

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01 JAN -5 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. SECURITY E ADVISOR CORP.  
(Corporation Name) (Document #)

2. (Corporation Name) (Document #) 900003521479--1  
-01/03/01--01011--026

3. (Corporation Name) (Document #) \*\*\*\*\*78.75 \*\*\*\*\*78.75

4. (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input checked="" type="checkbox"/>	Reinstatement
<input checked="" type="checkbox"/>	Trademark
<input checked="" type="checkbox"/>	Other

RECEIVED  
01 JAN -3 AM 10:31  
DIVISION OF CORPORATION

FILED  
01 JAN -5 PM 2:33  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

January 3, 2001

LAZARUS

MIAMI, FL

SUBJECT: SECURITY E ADVISOR CORP.  
Ref. Number: W01000000166

We have received your document for SECURITY E ADVISOR CORP.. However, the document has not been filed and is being returned for the following:

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole  
Corporate Specialist

Letter Number: 701A00000319

RECEIVED  
01 JAN -5 AM 11:02  
DIVISION OF CORPORATIONS

## ARTICLES OF INCORPORATION

*The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I - NAME

*The name of the corporation shall be:*

SECURITY E ADVISOR CORP.

### ARTICLE II - PRINCIPAL OFFICE

*The principal place of business and mailing of this corporation shall be:*

3632 CORAL SPRINGS DRIVE  
CORAL SPRINGS, FL 33065

### ARTICLE III - SHARES

*The number of shares of stock that this corporation is authorized to have outstanding at any one time is:*

1,000

### ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

*The name and address of the initial registered agent is:*

MICHAEL V. PINGREE  
3632 CORAL SPRINGS DRIVE  
CORAL SPRINGS, FL 33065

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TALLAHASSEE FLORIDA

**ARTICLE V - INCORPORATOR**

**The name and street address of the incorporator to these Articles of Incorporation is:**

MICHAEL V. PINGREE  
3632 CORAL SPRINGS DRIVE  
CORAL SPRINGS, FL 33065

**The undersigned incorporator has executed these Articles of Incorporation this 02 day of JANUARY 2001.**

  
Signature

**ARTICLE VI- DIRECTOR(S)**

**The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):**

MICHAEL V. PINGREE                      PRESIDENT  
3632 CORAL SPRINGS DRIVE  
CORAL SPRINGS, FL 33065

FABIAN A. DIAZ                      VICE PRESIDENT  
8920 NW 153 TR.  
MIAMI LAKES, FL 33018

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE**

**Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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 Signature

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