## POZOOOOO1465

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

500004749606E	כ
*****78.75 *****78.75	

SUBJECT: Vanguard Protection Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for :				
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	of			
FROM:	Donald Koname (Pr	inted or typed)	SECRET	02 JAN			
	2700 Keg	Address COLVIII	ARY OF S	-3 #			
•	City,	State & Zip	L ORDE	8: 56	4500		
Daytime Telephone number							
	1/0000	5					

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

01-07-02

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	is si
ARTICLE I NAME  The name of the corporation shall be:	02 JA
Vanguard Protection, Inc.	HASSE
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	ST 8:
227 N. John Young Parkway ARTICLE III PURPOSE	S6 RIDA
The purpose for which the corporation is organized is:	
Ticket takers, security Officers	
ARTICLE IV SHARES	
The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	
The Hame(s), address(es) and thro(s).	
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ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
Donald Honowitz	
2700 Red Bay Ct.	
41:55.FT. 34744	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
and a Victoria Konowitz	
DONALO FI BY744	
Donald : Victoria Honowitz 2700 Red Bay Ct. Kiss. FT. 34744	
	at the place designated in this
**************************************	capacity
certificate, I am jumilar wan tala-acceptions appearance	17/7/2/11
DON K MOUTO	148/01
Signature/Registered Agent Donald Konowitz Date	
	12/20/21
Signature/Incorporator Donald Konowitt Date	1 <u>4/28/01</u>
Signature/Incorporator Donald Konowing Dan	