# POR EUD LETTO 1778 ment of State

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

Tallahassee, FL 323	314	_		3 PM 4: 40
SUBJECT:	Asgard Protective Services, Inc.			5 5
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)	
Enclosed are an origi	inal and one (1) copy of the arti	cles of incorporation and	d 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	
FROM:		er E. Nelson		
_	Name (Printed or typed)  80000- 8461 Gardens Circle  Address		3 <b>00004914</b> -02/13/021 ******78.75	5685 01045004 *****78.75
_	Sarasota, FL 34243 City, State & Zip		iller	
	(941) 366-6992  Daytime Telephone number			

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

# 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:

Asgard Protective Services, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8461 Gardens Circle Sarasota, FL 34243

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of this corporation is to transact any/all lawful businesses for which corporations may be incorporated under Chapter 607 Florida Statutes.

#### ARTICLE IV SHARES

The number of shares of stock is:

This Corporation is authorized to issue one thousand (1,000) shares of common stock of one (1.00) dollar per share.

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Christopher E. Nelson President 8461 Gardens Circle Sarasota, Fl 34243

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Christopher E. Nelson 8461 Gardens Circle Sarasota, FL 34243

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christopher E. Nelson 8461 Gardens Circle Sarasota, FL 34243

Signature Registered Agent

One of the state of the state

Signature/Incorporator

Date