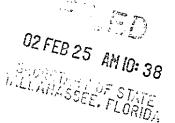
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TRANSMITTAL LETTER



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

SUBJECT: /HOMAS SANON-JULES (Proposed corp	TROFESSIONA SECURITY Porate name - must include suffix)	ACADEM of INCO
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Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00

\$78.75

Filing Fee Filing Fee

& Certificate of Status

\$78.75

Filing Fee

\$87.50 Filing Fee,

& Certified Copy Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: IHOMAS SANON - Vult 5
Name (Printed or typed)

· M2/28V

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florid	a
The many segretary and the segretary and the segretary	
Rusiness Corporation Act, hereby adopts the following Articles of Incorporation.	

ARTICLE I NAME	Professional Security Academy, INC. FLORIDA
The name of the corporation shall be:	PROSESSIONAL SECURITY ACADEMY)
THOMAS SANON-JULES.	

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 2184 MAMI BEACH, Florida 33140

ARTICLE III SHARES

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

1,000 . Sthones C+ 100.00 par Value

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

THOMAS SANON- FULES 9620 Sw 18/ Fen Minny, A 33157

INCORPORATOR ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

THOMAS SAMON FULES 9620 Sw 181 Tex Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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 proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent