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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: Arcom Control Systems, Inc  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Arcom Control Systems, Inc  
Name (Printed or typed)

2114 N. Flamingo Road #141  
Address

Pembroke Pines, Florida 33028  
City, State & Zip

954-392-6402  
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:

Arcom Control Systems, Inc

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2114 N. Flamingo Road #141  
Pembroke Pines, Florida 33028

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional corporation

## ARTICLE IV SHARES

The number of shares of stock is:

1000 Shares With Value of \$1.00 Per Stock

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Frank Gossen - Prez  
2114 N. Flamingo Road #141  
Pembroke pines, FL 33028

## ARTICLE VI REGISTERED AGENT

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

Gary Kallam  
2114 N. Flamingo Road #141  
Pembroke Pines, FL 33028

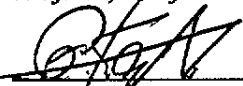
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gary Kallam  
2114 N. Flamingo Rd #141  
Pembroke Pines, FL 33028

\*\*\*\*\*

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/Registered Agent

1/21/03

Date



Signature/Incorporator

1/21/03

Date

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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