

P03000039771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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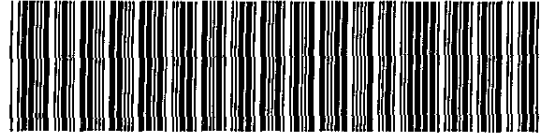
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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CLERK OF STATE
TALLAHASSEE FLORIDA

4/9/03

EXPRESS CORPORATE FILING SERVICE INC.
Requestor's Name

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

OFFICE USE ONLY

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

1. BEST ALARMS SECURITY, CORP
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in ☒ Pick up time ☒ 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 type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

Examiner's Initials

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2003 APR -8 AM 11:39

Date APRIL APRIL 7, 2003

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Re BEST ALARMS SECURITY, CORP., Inc.
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

(individual's name)

BEST ALARMS SECURITY, CORP.

(name of corporation)

MAILING ADDRESS OF CORPORATION

13201 SW 39 TERRACE

MIAMI, FLORIDA 33175

PHONE

(305) 223-3255

Area Code

Phone Number

Ext.

ARTICLES OF INCORPORATION

of

BEST ALARMS SECURITY, CORP.

(name of corporation)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned subscriber(s) to these Articles of incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

BEST ALARMS SECURITY, CORP.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE Dollar(s) (\$ 1.00) par. value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

| | | | |
|---------|---------------------|-------|-------------------|
| NAME | SERGIO GONZALEZ | | |
| ADDRESS | 13201 SW 39 TERRACE | | |
| CITY | MIAMI | STATE | FLORIDA ZIP 33175 |

The principal office, if known, or the mailing address of the corporation is:

| | | | |
|---------|-----------------------------|-------|--------------|
| NAME | BEST ALARMS SECURITY, CORP. | | |
| ADDRESS | 13201 SW 39 TERR. | | |
| CITY | MIAMI | STATE | FL ZIP 33175 |

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

| | | |
|---------|-------------------|--------------------|
| NAME | SERGIO GONZALEZ | PDT/REG. AGENT. |
| ADDRESS | 13201 SW 39 TERR. | |
| CITY | MIAMI | STATE FL ZIP 33175 |
| NAME | | |
| ADDRESS | | |
| CITY | STATE | ZIP |
| NAME | | |
| ADDRESS | | |
| CITY | STATE | ZIP |

Article VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

| | | | |
|---------|-------------------|-------|--------------|
| NAME | SERGIO GONZALEZ | | |
| ADDRESS | 13201 SW 39 TERR. | | |
| CITY | MIAMI | STATE | FL ZIP 33175 |
| NAME | | | |
| ADDRESS | | | |
| CITY | | STATE | ZIP |
| NAME | | | |
| ADDRESS | | | |
| CITY | | STATE | ZIP |

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 7 day of APRIL, XX 2003

Sergio Gonzalez (Seal)

(Seal)

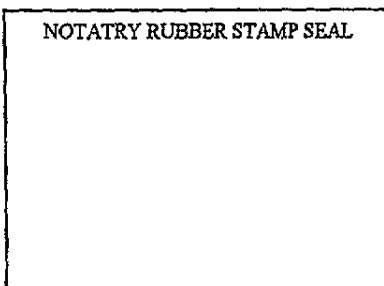
(Seal)

STATE OF FLORIDA)
COUNTY OF MIAMI - DADE) SS 593-31-4282

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared: SERGIO GONZALEZ

| | |
|---------------------------------------|---|
| <u>X Sergio Gonzalez</u> Signature | <u>FL DL # G-524-792-72-249-0</u> Form of Identification |
| _____ Signature | _____ Form of Identification |
| _____ Signature | _____ Form of Identification |

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that HE executed these articles of Incorporation, that I relied upon the form XX of identification of the above named person XX as indicated opposite each name, and that an oath was not taken.



Witness my hand and official seal in the County and State last aforesaid this
7 day of APRIL, XX 2003

Notary Signature

**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**CERTIFICATE OF REGISTERED AGENT
OF**

BEST ALARMS SECURITY, CORP.

(name of corporation)

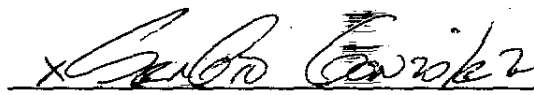
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation
at 13201 SW 39 TERR.
MIAMI, FL 33175

has named SERGIO GONZALEZ

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.


(registered agent)