

# Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : ACH INDUSTRIES, INC.

Account Number : 070744001530

Phone : (305) 358-2571 Fax Number

: (305)373-7718

FLORIDA PROFIT CORPORATION OR P.A.

SERSECO SECURITY GROUP, CORP.



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SECRETARY OF STATE TALL AHASSEE FLORIDA

### ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I - NAME

The name of corporation shall be:

Serseco Security Group, Corp.

### ARTICLE II - PRINCIPAL OFFICE

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

13651 Sw. 72 Av. Miami, FL 33158

#### ARTICLE III - SHARES

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

10,000

# ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Franklin Chaparro-Rojas

13651 Sw. 72 Av. Miami, FL 33158 HO3-328098

## ARTICLE V - INCORPORATOR

The name and street address of the Incorporator to these Articles of Incorporation is:

Franklin Chaparro-Rojas

13651 Sw. 72 Av. Miami, FL 33158

The undersigned incorporator has executed these Articles of Incorporation this 4th day of November of 2003.

Signature

#### ARTICLE VI - DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

Franklin Chaparro-Rojas Cristina Vegas de Chaparro

13651 Sw. 72 Avenue Miami, FL 33158

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 provision of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature