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TRANSMITTAL LETTER

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

SUBJECT: AUTO SECURITY EXPERTS, INC.

Proposed corporate name - must include suffix

Enclosed is and original and one (1) copy of the articles of incorporation and a check for \$78.75 in payment of the *Filing Fee & Certificate of Status*.

FROM: **JEFFREY A. SCHNEIDER**

SCHNEIDER FINANCIAL SERVICES, INC.

1402 ROYAL PALM BEACH BLVD

BUILDING 700, SUITE 110

ROYAL PALM BEACH, FL 33411

<u>561-868-1868</u>

Daytime Telephone Number

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

AUTO SECURITY EXPERTS, INC.

ARTICLE II PRINCIPLE OFFICE

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

1402 ROYAL PALM BEACH BLVD BUILDING 700, SUITE 110 ROYAL PALM BEACH, FL 33411 O4 JAN 29 PH 12: 21
SECTION OF TALL AHASSEF ET OFTON

ARTICLE III SHARES

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

1,000 SHARES OF COMMON

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JEFFREY A. SCHNEIDER 1402 ROYAL PALM BEACH BLVD BUILDING 700, SUITE 110 ROYAL PALM BEACH, FL 33411

ARTICLE V INCORPORATOR

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

JEFFREY A. SCHNEIDER 1402 ROYAL PALM BEACH BLVD BUILDING 700, SUITE 110 ROYAL PALM BEACH, FL 33411

Signature of Incorporator

1 12 4/2004

Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certification, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my officion as registered agent.

ignature of Registered Agent

Vata.