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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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OR 3/12

TRANSMITTAL LETTER

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

SUBJECT: 911 SECURITY & INVESTIGATION AGENCY, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

JAMES A. ANTERIO
Name (Printed or typed)

911 NORTH ORANGE AVE SUITE 432
Address

ORLANDO, FL. 32801
City, State & Zip

407-929-2616
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:

911 SECURITY & INVESTIGATION AGENCY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

911 NORTH ORANGE AVE. SUITE 432 ORLANDO, FL 32801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SECURITY & INVESTIGATION

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

JAMES A. ANTERIO - (PRESIDENT) 911 NORTH ORANGE AVE SUITE 432
ORLANDO, FL 32801

AMBROSE PALERMO JR. (PRESIDENT) 911 NORTH ORANGE AVE. SUITE 432
ORLANDO FL. 32801

ARTICLE VI REGISTERED AGENT

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

CHRIS ANTERIO

911 NORTH ORANGE AVE SUITE 432 ORLANDO, FL 32801.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

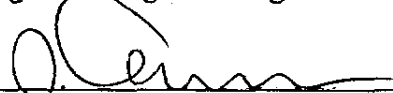
JAMES A. ANTERIO

911 NORTH ORANGE AVE. SUITE 432 ORLANDO FL. 32801

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

3-8-04
Date


Signature/Incorporator

3-8-04
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA