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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (305)634-3694

FLORIDA PROFIT CORPORATION OR P.A.

all-pro police & fire supply, inc.

| Certificate of Status | 0 |
|-----------------------|-------------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$ 70,00 |

D. WHITE JUN 1 6 2004



HOY 000 126321 ARTICLES OF INCORPORATION

FILED

The undersigned incorporator, for the purpose of forming a corporation under the A 9: 15
Florida Business Corporation Act, hereby adopts the following Articles of Incorporation OF STATE

ARTICLE I NAME

The name of the corporation shall be:

All-Pro Police & Fire Supply, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 11412 W. Sample Road, Coral Springs, FL 33065

ARTICLE III SHARES

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

Ten Thousand (10,000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Robert McGilloway, 11412 W. Sample Road, Coral Springs, FL 33065

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Robert McGilloway, 11412 W. Sample Road, Coral Springs, FL 33065

ARTICLE VI OFFICERS AND DIRECTOR(S)

The initial directors of the corporation shall be:

Robert McGilloway, 11412 W. Sample Road, Coral Springs, FL 33065 Glenda McGilloway, 11412 W. Sample Road, Coral Springs, FL 33065 continued

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Page 2 Articles of Incorporation of All-Pro Police and Fire Supply, IncFILED

2004 JUN 15 A 9 15 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Signature of Incorporator

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Having been named as registered agent and to accept service of process for the above stated corporation at the 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 provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent

Date

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