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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : WARD, DAMON & POSNER, P.A.

Account Number : 072262000447 Phone : (561)842-3000 Fax Number : (561)842-3626 SECRETARY OF STATE
ALL ABASSEF, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

JAKOLA ALARM SYSTEMS, INC.

Certificate of Status	1
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ARTICLES OF INCORPORATION

OF

JAKOLA ALARM SYSTEMS, INC.

THE UNDERSIGNED, acting as incorporator of a Corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation for such Supporation:

ARTICLE I - NAME

The name of this Corporation is: JAKOLA ALARM SYSTEMS, INC.

ARTICLE II - DURATION

The duration of this Corporation is perpetual.

ARTICLE III - PURPOSE

The purpose for which this Corporation is organized is to engage in any lawful act or activities for which corporations may be organized under the laws of the State of Florida.

ARTICLE IV - MAILING ADDRESS OF CORPORATION

The mailing address of the business is 2880 Lake Osborne Drive, #201, Lake Worth, Florida 33461 and the principal place of business of this Corporation is 2880 Lake Osborne Drive, #201, Lake Worth, Florida 33461.

ARTICLE V - STOCK

The aggregate number of shares which this Corporation shall have authority to issue is Ten Thousand (10,000) shares of common voting stock.

ARTICLE VI - INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of this Corporation's initial registered office in Florida is 4420 Beacon Circle, Suite 100, West Palm Beach, Florida 33407 and the name of its initial registered agent at that address is Michael J Posner.

Prepared by: Michael J Posner 4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407

Bar No: 525685 \(\text{Phone: 561/842-3000} \)

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ARTICLE VII - INCORPORATOR

The name and address of the Incorporator is:

Name

Address

Michael J Posner

4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407

DATED this 23rd day of July, 2004.

Michael J Posner

(Incorporator and Registered Agent)

STATE OF FLORIDA)
COUNTY OF PALM BEACH)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Michael J Posner to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this 23rd day of July, 2004.

Notary Public State of Florida at Large

Sign:

My Commission Expires:

Print:

OHRISTINA ZIMENIAN
MY COMMISSION 9 DD 194513
EXPIRES: July 17, 2007
Borkled Trau Namy Public Underechant

Prepared by: Michael J Posner 4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407

Bar No: 525685 \(\rightarrow \text{Phone: 561/842-3000} \)

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

ACKNOWLEDGMENT:

Having been named to accept service of process for JAKOLA ALARM SYSTEMS, INC., at the initial registered office of the Corporation in this State designated in its Articles of Incorporation, I hereby accept to act in this capacity and agree to comply with the provisions of Section 607.0505 Florida Statutes.

Date: July 23, 2004

Michael J Posner

4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407

FILED

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SECRETARY OF STATE

Prepared by: Michael J Posner 4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407

Bar No: 525685 () Phone: 561/842-3000

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