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## TRANSMITTAL LETTER

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

**SUBJECT:** ARAMIL CORPORATION

**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** ARABIA GREER

Name (Printed or typed)

117 BIMINI ROAD

Address

COCOA BEACH, FL 32931

City, State & Zip

321-427-9968

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:

ARAMIL CORPORATION

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

117 BIMINI ROAD, COCOA BEACH, FLORIDA 32931

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ACCESS CONTROL & ALL TYPES OF SECURITY EQUIPMENT SALES, SERVICE AND INSTALLATION FOR COMMERCIAL, INDUSTRIAL AND RESIDENTIAL APPLICATIONS.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

ARABIA GREER, PRESIDENT & TREASURER

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ARABIA GREER  
117 BIMINI ROAD  
COCOA BEACH, FL 32931

**ARTICLE VII INCORPORATOR**

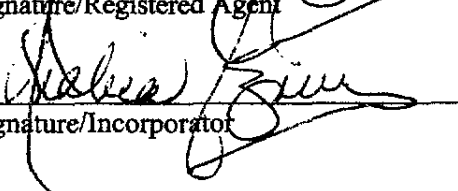
The name and address of the Incorporator is:

ARABIA GREER  
117 BIMINI ROAD  
COCOA BEACH, FL 32931

\*\*\*\*\*  
*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

03-18-05  
Date

  
\_\_\_\_\_  
Signature/Incorporator

03-18-05  
Date