

P05000063795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500051807865

04/28/05--01039--002 **87.50

FILED

05 APR 28 PM 3:52

RECEIVED STATE
TALLAHASSEE, FLORIDA

1. Burch MAY 2 2005

TRANSMITTAL LETTER

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

SUBJECT: ALPINE SECURITY & PROTECTIVE SERVICES, INC.
(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
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: Alvin Lewis
Name (Printed or typed)

160 NW 176th Street, Suite# 302-3
Address

Miami, FL 33169
City, State & Zip

(954) 347-2514
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:

Alpine Security & Protective Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

160 NW 176th Street
Suite # 302-3
Miami, FL 33169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide security and protective services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Alvin Lewis - President - Responsible for overall operations

ARTICLE VI REGISTERED AGENT

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


Alvin Lewis
160 NW 176th Street
Suite# 302-3
Miami, FL 33169

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Alvin Lewis
160 NW 176th Street
Suite# 302-3
Miami, FL 33169

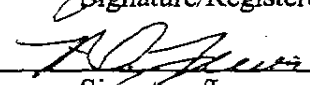
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

04/25/05

Date



Signature/Incorporator

04/25/05

Date

FILED
05 APR 28 PM 3:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA