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TRANSMITTAL LETTER

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

SUBJECT: PRO SECURITY AND LOW VOLTAGE SERVICES, INC. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	MICHAEL S. OLIVER Name (Printed or typed) 13377 SOUTHERN PRECAST DR. Address			
	ALACHUA, FL City,	32615 State & Zip		
352-372-6588 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: PRO SECURITY AND LOW VOLTAGE SERVICES, FAC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 13377 SOUTHERN PRECAST DR. ALACHUA, FL 32615 ARTICLE III PURPOSE The purpose for which the corporation is organized is: INSTALL SECURITY SYSTEMS & LOW VOLTAGE ARTICLE IV SHARES The number of shares of stock is: 1000 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): MICHAEL S.OLIVER, PRESIDENT CHRISTINE OLIVER, SECRETARY 7516 NW 1364 STREET GAINESVILLE, FL 32653 REGISTERED AGENT The name and Florida street address of the registered agent is: MICHAEL S. OLIVER 7516 NW 136 STREET GAINESVILLE, FL 32653 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: MICHAEL S. OLIVER 1516 NW 136 STREET BAINESVILLE, FL 32653 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 ignature/Registered Agent

ignature/Incorporator

FILED

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SECRETARY OF STATE

TALLAHASSEE FLORIDA
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/
REGISTERED OFFICE

Under the provisions of F.S. 608.415, MICHAELS. OLIVER, submits the following statement to designate a registered office and registered agent in the state of Florida:

- 1. The name of the corporation is: PROSECURITY AND LOW VOLTAGE SERVICE
- 2. The name and street address of the registered agent in IVC. Florida are:

NAME

ADDRESS

MICHAEL S. OLIVER

7516 NW 136th STREET GAINESVILLE, FL 32653

The undersigned, being the person named in the articles of incorporation of PRO SECURITY AND LOW VOUNGE SERVICES as the registered agent of this corporation, hereby consents to accept service of process for the above-stated corporation at the place designated in the articles of incorporation, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.

Registered Agent