

PO6000102485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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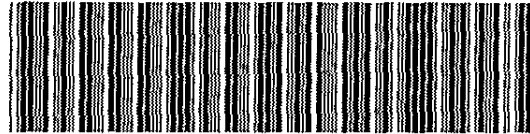
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL 32307

C.S. 8-7

## COVER LETTER

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

SUBJECT: GARRETT SECURITY CONSULT 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: TONY GARRETT

Name (Printed or typed)

5127 CARIBBEAN BLVD APT 521

Address

WEST PALM BEACH, FL 33407

City, State & Zip

561-723-2729

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:

GARRETT SECURITY CONSULT INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5127 CARIBBEAN BLVD # 521  
WEST PALM BEACH, FL 33407

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SECURITY AND PROTECTIVE SERVICES

## 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):

TONY GARRETT  
5127 CARIBBEAN BLVD # 521  
WEST PALM BEACH, FL 33407

## ARTICLE VI REGISTERED AGENT

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

TONY GARRETT  
5127 CARIBBEAN BLVD # 521  
WEST PALM BEACH, FL 33407

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TONY GARRETT  
5127 CARIBBEAN BLVD # 521  
WEST PALM BEACH, FL 33407

\*\*\*\*\*

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

08-04-06  
Date

  
Signature/Incorporator

08-04-06  
Date

FILED

06 AUG -7 PM 2:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA