

PO6000145085

(Requestor's Name)

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(City/State/Zip/Phone #)

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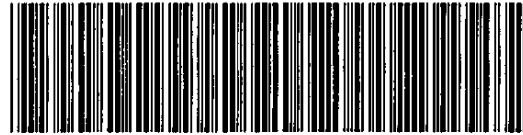
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pa

## COVER LETTER

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

SUBJECT: C. P. S. 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: LAZAR MEULENER  
Name (Printed or typed)

6121 S.W. 17 STREET  
Address

MIAMI FLORIDA 33155  
City, State & Zip

305-525-5653  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 25, 2006

LAZARO MEULENER  
6121 S.W. 17 STREET  
MIAMI, FL 33155

SUBJECT: C.P.S. INC.  
Ref. Number: W06000046799

We have received your document for C.P.S. INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call 850-245-6052.

Paisley A Alford  
New Filing Section  
Division of Corporations

Letter Number: 706A00063447

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# 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: ~~C. P. S. INC.~~  
CPS SECURITY, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 6121 S.W. 17 STREET  
MIAMI, FLORIDA 33155

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR PROFIT BUSINESS  
SECURITY GUARD COMPANY

## ARTICLE IV SHARES

The number of shares of stock is: 10,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): LAZARO MEULENER  
PRESIDENT, SECRETARY  
6121 S.W. 17 STREET  
MIAMI, FLORIDA 33155

## ARTICLE VI REGISTERED AGENT

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

LAZARO MEULENER  
6121 S.W. 17 STREET  
MIAMI, FL. 33155

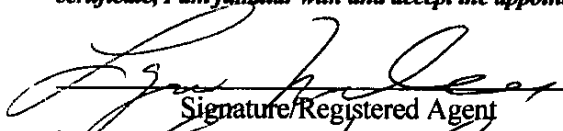

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LAZARO MEULENER  
6121 S.W. 17 STREET  
MIAMI, FL. 33155

\*\*\*\*\*

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  
  
Signature/Incorporator

10/17/06  
Date  
10/17/06  
Date