

PO6000154898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

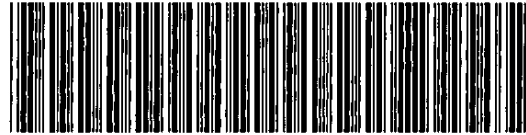
(Business Entity Name)

(Document Number)

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

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12/18/06--01046--008 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 DEC 18 PM 3:53

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**COVER LETTER**

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

SUBJECT: CUSTOM PROTECTION 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: LAZARO 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.**

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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DIVISION OF CORPORATIONS  
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## ARTICLE I NAME

The name of the corporation shall be:

CUSTOM PROTECTION SERVICES, 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 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


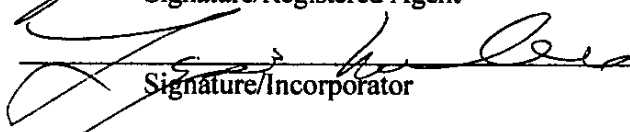
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LAZARO MEULENER  
6121 S.W. 17 ST.  
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

12-14-06  
\_\_\_\_\_  
Date  
12-14-06  
\_\_\_\_\_  
Date