

P07000011176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

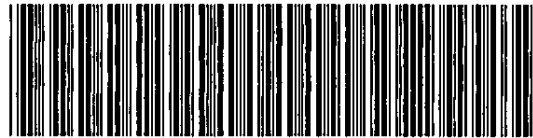
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07 JAN 24 PM 2:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT: Hyperion Security 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: **James Valentin**

Name (Printed or typed)

**240 North Briggs Avenue**

Address

**Sarasota, FL 34237**

City, State & Zip

**(941) 957-3967**

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:

Hyperion Security Services Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

240 North Briggs Avenue  
Sarasota, FL 34237

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
to provide contract security 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):

James Valentin, President  
240 North Briggs Avenue  
Sarasota, FL 34237

Lydia Valentin, Vice President  
240 North Briggs Avenue  
Sarasota, FL 34237

**ARTICLE VI REGISTERED AGENT**

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

James Valentin  
240 North Briggs Avenue  
Sarasota, FL 34237

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

James Valentin  
240 North Briggs Avenue  
Sarasota, FL 34237

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*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*

James Valentin  
Signature/Registered Agent  
James Valentin  
Signature/Incorporator

18 JAN 2007  
Date  
18 JAN 2007  
Date

FILED  
07 JAN 24 PM 2:36  
CLERK OF STATE  
TALLAHASSEE, FLORIDA