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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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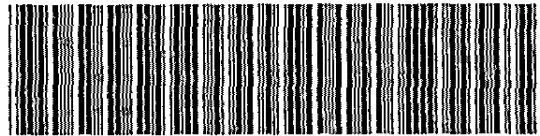
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ra

TRANSMITTAL LETTER

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

SUBJECT: Complete Defense 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: David S. Fitzpatrick
Name (Printed or typed)

14648 Kittlanselt Way
Address

Orlando, Florida, 32828
City, State & Zip

321-278-3581
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:

Complete Defense Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14648 Kitlanselt Way
Orlando, Florida, 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful activity

ARTICLE IV SHARES

The number of shares of stock is:

(100) One Hundred Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

David S. Fitzpatrick - President

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

David S. Fitzpatrick
14648 Kitlanselt Way
Orlando, Florida, 32828

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David S. Fitzpatrick
14648 Kitlanselt Way
Orlando, Florida, 32828

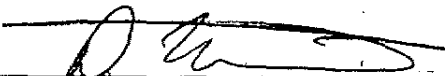
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent DAVID S. FITZPATRICK

02-07-07

Date



Signature/Incorporator DAVID S. FITZPATRICK

02-07-07

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA