

P07000027019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

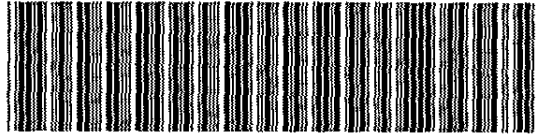
(Business Entity Name)

(Document Number)

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02/19/07--01040--029 **78.75

W07-8708

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2007 FEB 27 PM 2:34
SECRETARY OF STATE
TALLAHASSEE FLORIDA

✓

T. Burch MAR -1 2007.

COVER LETTER

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

SUBJECT: Advanced Reality Tactical Training 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: James Magas
Name (Printed or typed)

P.O. Box 7062
Address

Ft Myers FL 33901
City, State & Zip

239-851-9217
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 20, 2007

JAMES MAGAS
PO BOX 7062
FT MYERS, FL 33911

SUBJECT: ADVANCED REALITY TACTICAL TRAINING INC.
Ref. Number: W07000008708

We have received your document for ADVANCED REALITY TACTICAL TRAINING 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):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the original and one copy of 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) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 807A00012450

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: *ADVANCED Reality Tactical Training Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is: *3612 S.W. 11th CT
Cape Coral, FL 33914*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *LAW ENFORCEMENT PRACTICAL TRAINING*

ARTICLE IV SHARES

The number of shares of stock is: *100*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*James Magas - Pres/owner
3612 SW 11th CT
Cape Coral, FL 33914*

ARTICLE VI REGISTERED AGENT

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

*James Magas
3612 SW 11th CT
Cape Coral, FL 33914*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*James Magas
3612 SW 11th CT
Cape Coral, FL 33914*

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 Magas

Signature/Registered Agent

2-25-07

Date

James Magas

Signature/Incorporator

2-25-07

Date

2007 FEB 27 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED