## P070000108946

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				



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## **COVER LETTER**

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

SUBJECT: AME	erican Detection Lea	m inc.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Pueleard our en evie	inal and ana (1) cause af the arti	alar of incompantion and	La abaole for
Enclosed are an ong	inal and one (1) copy of the arti	cies of incorporation and	a check for.
\$70.00	\$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
_	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
		ADDITIONAL CO	Status
		ADDITIONAL CO	PY REQUIRED
			<del></del>
EDOM A	merican Detection Tear	n Inc	
FROM: <u>/ ·</u>	Name	(Printed or typed)	
	2235 sw cape cod driv	re	
		Address	
	Port Saint Lucie, FL 34	953	
		State & Zip	
	_		
	772 528 2665		

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

Daytime Telephone number

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:	
American Detection Team Inc	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
2235 sw cape cod drive Port Saint Lucie, FL 34953	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Residential and small business alarm sales	07 G SECT
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):	FILED 07 OCT -1 AM 9: 4 SECRETARY OF STATE ALL AHASSEE, FLORID
Alex Mignatti	**************************************
2235 sw cape cod drive	
Port Saint Lucie FL 34953 President	
1 todigene	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is	tw
Alex Mignatti	
2235 sw cape cod drive	
Port Saint Lucie, FL 34953	
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:	
Alex Mignatti	
2235 sw cape cod drive	
Port Saint Lucie, FL 34953	
**************************************	
Having been named as registered agent to accept service of process for the above stated corporation at the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	
ALEX MIGHATTI	~ ~·

9-27-07 Date

Signature/Registered Agent
ALEX MIGNATT:

Signature/Incorporator