

PD8000002240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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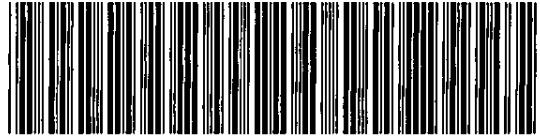
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

141

## COVER LETTER

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

SUBJECT: PEÑA 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  
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: HOWARD PEÑA  
Name (Printed or typed)

6029 MEMORIAL HWY  
Address

TAMPA, FL. 33615  
City, State & Zip

813 900-3578  
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: PEÑA SECURITY SERVICES, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 6029 MEMORIAL HWY  
TAMPA, FL. 33615

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SECURITY SERVICES

## ARTICLE IV SHARES

The number of shares of stock is: 1,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

HOWARD PEÑA

6029 MEMORIAL HWY

TAMPA, FL. 33615

(PRESIDENT, AND CEO)

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**ARTICLE VI REGISTERED AGENT**

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

HOWARD PEÑA  
6029 MEMORIAL HWY  
TAMPA, FL. 33615

**ARTICLE VII INCORPORATOR**

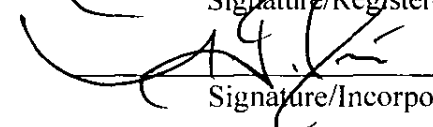
The name and address of the Incorporator is:

HOWARD PEÑA  
6029 MEMORIAL HWY  
TAMPA, FL. 33615

\*\*\*\*\*

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

01/02/2008  
\_\_\_\_\_  
Date

01/02/2008  
\_\_\_\_\_  
Date

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