



**COVER LETTER**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 JAN 22 AM 8:57

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

**SUBJECT:** Ampowered, 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:** Jennifer d. Arcuri

Name (Printed or typed)

5010 King Arthur Ave.

Address

Davie, FL 33331-3333

City, State & Zip

954-444-3965

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)

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### **ARTICLE I NAME**

The name of the corporation shall be:

**Ampowered, Inc.**

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### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

5010 King Arthur Ave.

Davie, FL 33331-3333

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To market, purchase and resale self defense ECDs (electronic control devices).

### **ARTICLE IV SHARES**

The number of shares of stock is:

**1**

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Jennifer d. Arcuri, President

5010 King Arthur Ave.

Davie, FL 33331-3333

**ARTICLE VI REGISTERED AGENT**

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

Jennifer d. Arcuri  
5010 King Arthur Ave.  
Davie, FL 33331-3333


**ARTICLE VII INCORPORATOR**


The **name and address** of the Incorporator is:

Jennifer d. Arcuri  
5010 King Arthur Ave.  
Davie, FL 33331-3333

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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*

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Signature/Incorporator

1/15/08  
Date

1/15/08  
Date

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