P0900009463

(Requestor's Name)				
(Address)				
(ΔΑ)	dress)			
(714	u1033)			
·				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
_	_	_		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



500142134465

01/29/09--01020--010 **78.75

SECRETARY OF STATE

09 JAN 29 PM 1: 23

14

COVER LETTER

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

SUBJECT: ACCE	SS & SECURITY INTEGRATED	SOLUTIONS, INC.	
	(PROPOSED CORPOR. inal and one (1) copy of the art	ATE NAME – <u>MUST INCI</u>	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	DAVID NO Name 2610 TAMPA	e (Printed or typed)	<u>.</u>
	TAMPA F	L 33619 y, State & Zip	
	813-885 Daytime	T-6615 Telephone number	

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

APPRUVE: AND FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Ð

09 JAN 29 PM 1: 23

ARTICLE I NAME

The name of the corporation shall be:

Access & Security Integrated Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

2610 Tampa East Boulevard Tampa, FL 33619

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Access control and security products

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Cindy Hayden, CEO 1535 Memphis Junction Road Bowling Green, KY 42101

David Nail, CFO 2610 Tampa East Boulevard

ARTICLE VI REGISTERED AGENT

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

DAVID HAIL

2610 TAMPA EAST BLVD.

TAMPA, FL 33619

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVID NAIL 2610 TAMPA EAST BLUD TAMPA, FL 33619

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 Date

Signature/Incorporator Date