

P090000073288

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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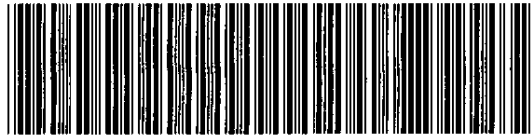
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/31/09--01028--022 **78.75

APPROVED
AND
FILED

09 AUG 31 PM 3:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

COVER LETTER

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

SUBJECT: DNE Enforcement Security Patrol 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: Nilza M. Echeverry
Name (Printed or typed)

330 Cherokee Ave.
Address

Haines City FL, 33844
City, State & Zip

863-427-5309
Daytime Telephone number

Administration@freemansecurity.net
E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
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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:

DNE Enforcement Security Patrol, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

330 Cherokee Ave.
Haines City FL 33844

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide private security for public and private corporations and governmental entities.

ARTICLE IV SHARES

The number of shares of stock is:

4,000 shares of common stock with a par value of .20 cents each.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Nilza M. Echeverry, President
330 Cherokee Ave.
Haines City FL, 33844

ARTICLE VI REGISTERED AGENT

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

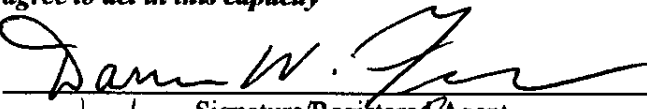
Darren W. Freeman
519 B Suite 3 Jones Ave.
Haines City FL, 33844

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

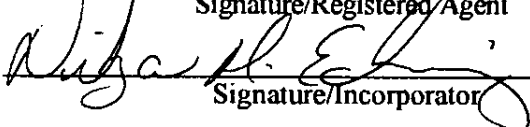
Nilza M. Echeverry
330 Cherokee Ave.
Haines City FL, 33844

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

08-14-09
Date



Signature/Incorporator

08-14-09
Date