

P09000100533

(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:

Office Use Only



000163527590

12/15/09--01031--018 \*\*87.50

FILED  
09 DEC 15 PM 2:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
12/16

**COVER LETTER**

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

**SUBJECT:** Harvey Systems, 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:** Michael H. Harvey Jr.  
Name (Printed or typed)

1515 Eden Isle Blvd NE #15  
Address

Saint Petersburg, Florida 33704  
City, State & Zip

727-424-0629  
Daytime Telephone number

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

**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: **HARVEY SYSTEMS, INC.**

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is: **HARVEY SYSTEMS, INC.  
1515 Eden Isle Blvd NE #15  
SAINT PETERSBURG, FLORIDA 33704**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**Sales, Install, service, sub-contract  
Security systems**

**ARTICLE IV SHARES**

The number of shares of stock is: **10**

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

List name(s), address(es) and specific title(s):  
**MICHAEL H. HARVEY JR. President  
1515 Eden Isle Blvd NE #15  
SAINT PETERSBURG, FLORIDA 33704**

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
**MICHAEL H. HARVEY JR.  
1515 Eden Isle Blvd NE #15  
SAINT PETERSBURG, FLORIDA 33704**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
**MICHAEL H. HARVEY JR.  
1515 Eden Isle Blvd NE #15  
SAINT PETERSBURG, FLORIDA 33704**

\*\*\*\*\*  
*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*

Michael Harvey  
Signature/Registered Agent

12/8/09  
Date

Michael Harvey  
Signature/Incorporator

12/8/09  
Date

**FILED**  
09 DEC 15 PM 2:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA