

P10000059/29

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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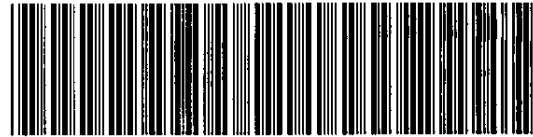
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APPROVED,
AND
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10 JUL 19 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 7/20/10

COVER LETTER

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

SUBJECT: TAS Alarm 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: Scott D. Herron

Name (Printed or typed)

4941 Misty Pines Trail

Address

Lake Worth, FL 33463

City, State & Zip

(561) 441-2018

Daytime Telephone number

scottherron@comcast.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, P.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

TAS Alarm Systems, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4941 Misty Pines Trail
Lake Worth, FL 33463

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Security Services

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

Scott Herron
4941 Misty Pines Trail
Lake Worth, FL 33463

ARTICLE VII INCORPORATOR

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

Scott Herron
4941 Misty Pines Trail
Lake Worth, FL 33463

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

Date

Date

10 JUL 19 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED