

P11000035230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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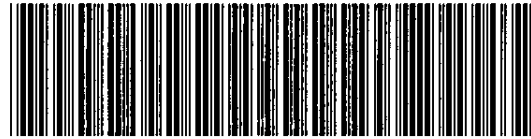
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/08/11--01039--019 **87.50

FILED
APR - 8 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 4/11/11

COVER LETTER

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

SUBJECT: Protection Specialists, 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: Wilfredo Perez-Borroto

Name (Printed or typed)

550 Okeechobee Boulevard, # 320

Address

West Palm Beach, Florida 33401

City, State & Zip

(561) 891.1697

Daytime Telephone number

willierperez@gmail.com

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)

FILED

ARTICLE I NAME Protection Specialists, Inc.
The name of the corporation shall be:

APR -8 PM 2:00

ARTICLE II PRINCIPAL OFFICE
Principal street address
550 Okeechobee Boulevard
320
West Palm Beach, Florida 33401

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide security training, personal protection, protection of property, investigations, firearms training/sales and security consulting.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Wilfredo Perez-Borroto, President</u>	Name and Title:	_____
Address:	<u>550 Okeechobee Boulevard</u>	Address:	_____
	<u># 320</u>		_____
	<u>West Palm Beach, Florida 33401</u>		_____

Name and Title:	<u>Roberto Portes, Vice President</u>	Name and Title:	_____
Address:	<u>561 Green Springs Place</u>	Address:	_____
	<u>West Palm Beach, Florida 33409</u>		_____

Name and Title:	<u>Roberto Portes, Treasurer</u>	Name and Title:	_____
Address:	<u>561 Green Springs Place</u>	Address:	_____
	<u>West Palm Beach, Florida 33409</u>		_____

ARTICLE VI REGISTERED AGENT

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

Name: Wilfredo Perez-Borroto
Address: 550 Okeechobee Boulevard #320
West Palm Beach, Florida 33401

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Wilfredo Perez-Borroto
Address: 550 Okeechobee Boulevard #320
West Palm Beach, Florida 33401

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

Required Signature/Registered Agent

3/18/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

3/18/11
Date