0940420

(Requestor's Name) (Address) (Address)	000181849030
ANTERRIO THORNTON 10040 N.W. SEVENTH COM MIAMI, FL 33150	DRT APTC
(Business Entity Name) - 780 - 704 - 59 23 (Document Number)	01/18/1101011002 **78
Certified Copies Certificates of Status Special Instructions to Filing Officer:	11 MAY 16
	Y 16 PH 2: 18

Office Use Only

)2 **78.75

WII-3052

m 5/10/11

COVER LETTER

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

SUBJECT: AMAZING SECURITY SERVICE INC DOC# W11000003052

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Filing Fee Filing Fee & Certificate of Status	Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
Name	ORNTON (Printed or typed) ENTH COURT APT C
MIRMI, FL, City,	33150 State & Zip
CHERRID 860	23 elephone number 1 AHOO. COM 1 for future annual report notification)
	<u> </u>

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 18, 2011

ANTERRIO THORNTON 10040 NW SEVENTH COURT APT C MIAMI, FL 33150

SUBJECT: AMAZING SECURITY SERVICE, INC.

Ref. Number: W11000003052

We have received your document for AMAZING SECURITY SERVICE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Upon receipt of your letter and/or check(s) totaling \$78.75, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight
Regulatory Specialist II Supervisor
New Filing Section

www.sunbiz.org

Letter Number: 211A00001448

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

RTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing address, if di	fferent is:
	HTHEVEC WIN OPOOL	10040 NW SEVEN	TH COURT
	COURT APT C	APT C.	
	MIANT, FL. 3350	MIAMI, FL, 3	3150
RTICLE III	PURPOSE		=
e purpose for v	which the corporation is organized is:		11 MAY 16
PECURIT	y Service		~
	•		<u></u>
			3
	A.T		?:
RTICLE IV	SHARES		
e number of sh	ares of stock is:		ထ
	INITIAL OFFICERS AND/OR DIRECTO		
	Title: HLITERRIO THORNION; P	Name and Title:	
Address:	10040 NIW SEVENTH COU		
	APT C MIAMI, FL, 3315	<u> </u>	
Name and	Pitle: GEROME MCKENZIE VR	Name and Title:	
Address:	10040 NW SEVENTH COU	Address:	
111111111111	APT C MIAMI FL. 33/50		
Moreon and T	Title:	Name and Title.	
Address:	Title.	Address:	
rida eg.			
0.000 D			
<i>PTICLE VI</i>	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	HULESSIO IHOSNION	or nie registeren agent in.	
· Address:	10040 NW SEVENITH COL	750	
	AUT C. MIAMI FL, 331	50	
		<u></u>	
TICLE VII	INCORPORATOR		
	Idress of the Incorporator is:	•	
^{>} Name:	HULLEBISIO THORNION		
:«Address:	COURT APT C MEANE,		
	COURT HPT C MEAME,	<u>FL</u> , 33150	
wina haan nas	ned as registered agent to accept service of proc	are for the above stated corneration at ti	he place designated b
	im familiar with and accept the appointment as r		
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11 -1		a 6	16/11
Jan Jane	Previous City of Paris and Assess		Date
	Required Signature/Registered Agent		Date
ubmit this doc	ument and affirm that the facts stated herein a	re true. I am aware that the false infor	mation submitted in
	Department of State constitutes a third degree fel		
	- A	and an account of the months only - was	1
11 4) // ////	র	116/11
1100 1			

Required Signature/Incorporator