

Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
F.L.S.C. SECURITY INC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 02 |
| Estimated Charge | \$78.75 |

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Corporate Filing Menu

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DIVISION OF CORPORATIONS

12 AUG 10 PM 1:33

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12 AUG 10 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/13/12

412000201416

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME F.I.S.C. SECURITY INC
The name of the corporation shall be:

12 AUG 10 PM 1:33

ARTICLE II PRINCIPAL OFFICE
Principal street address
1551 NE 168 STREET #105
NORTH MIAMI BEACH, FL 33162

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ANY AN ALL LAWFULL BUSINESS.

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | |
|---|-----------------------|
| Name and Title: <u>PRESIDENT-DERRICK PALMER</u> | Name and Title: _____ |
| Address: <u>1550 NE 168 STREET #105</u> | Address: _____ |
| <u>NORTH MIAMI BEACH, FL 33162</u> | _____ |
| _____ | _____ |
| Name and Title: _____ | Name and Title: _____ |
| Address: _____ | Address: _____ |
| _____ | _____ |
| _____ | _____ |
| Name and Title: _____ | Name and Title: _____ |
| Address: _____ | Address: _____ |
| _____ | _____ |
| _____ | _____ |

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: DERRICK PALMER
Address: 1550 NE 168 STREET #105
NORTH MIAMI BEACH, FL 33162

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
Name: DERRICK PALMER
Address: 1550 NE 168 STREET #105
NORTH MIAMI BEACH, FL 33162

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

Derrick Palmer

Required Signature/Registered Agent

8/10/2012

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.

Derrick Palmer

Required Signature/Incorporator

8/10/2012

Date

412000201996