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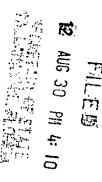
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
W12-42361		

Office Use Only



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COVER LETTER

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

SUBJECT: Compass Securities Corporation	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the art	icles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: John Ahern	e (Printed or typed)
50 Braintree Hill Park Suite 10	
	Address
Braintree , MA 02184	C444 9. 71
City,	State & Zip
781-535-6083	
Daytime 1	elephone number
john@compasssecurities.com	
· · · · · · · · · · · · · · · · · · ·	d for future annual report notification)

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



August 14, 2012

JOHN AHERN 50 BRAINTREE HILL PARK SUITE 105 BRAINTREE, MA 02184

SUBJECT: COMPASS SECURITIES CORPORATION

Ref. Number: W12000042361

We have received your document for COMPASS SECURITIES CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6052.

Letter Number: 912A00020940

Valerie Herring Regulatory Specialist II New Filing Section

www.sunbiz.org

The name of the corporation shall be:	s Corporation	
ARTICLE II PRINCIPAL OFFICE	स्थिति सम्बद्ध	
Principal street address 11450 SE Dixie Highway	Mailing address, if different is:	
	12 AUG 30 PH 4: 10	
Suite 101 Hobe Sound, FL 33455		
Hobe Souria, FL 33433	AND	
ARTICLE III PURPOSE	是是一个人的。 不是是人们也是不是一个人的。 不是一个人们也是一个人们的是一个人们的是一个人们的是一个人们的是一个人们的是一个人们的一个人们的一个人们的一个人们的一个人们的一个人们的一个人们的一个人们的	
The purpose for which the cornoration is organized is:	The second secon	
Sale of investment securities	₽°	
ARTICLE IV SHARES none IS. 000		
ARTICLE V INITIAL OFFICERS AND/OR DIREC	CTORS	
Name and Title:		
Address:	Address:	
Name and Title:	Name and Title:	
Address:	Address:	
and the same of th		
Name and Titles	Name and TM.	
Address:	Name and Title:	
ADDICE DE LOS DESCRIPTIONS ACRES		
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptal	hla) aftha mariatanad arant in	
Name: Fred Ford	of the registered agent is:	
Address: 11450 SE Dixie Hwv		
Hobe Sound FL 33455		
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is: Name: John Ahern		
Address: 50 Braintree Hill Park, Suite 1	105	
Braintree MA 02184		
Having been named as registered agent to accept service of p this certificate, I am familiar with and accept the appointment of	process for the above stated corporation at the place designated in as registered agent and agree to act in this capacity	
treatona	8/6/12	
Required Signature/Registered Agen	t 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.		
wowinent of the Department of Suite constitutes a third degree	jewny as proviaea jor in s.81 /.155, r.S.	
Jet // ///	Al.	
Required Signature/Incorporator	0/4/20/2	