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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

VH

## COVER LETTER

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** Secure Access and Surveillance, Inc

\_\_\_\_\_  
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

**Sarah Phillipps**

\_\_\_\_\_  
Contact Person

**Secure Access and Surveillance, Inc**

\_\_\_\_\_  
Firm/Company

**7027 W. Broward Blvd #235**

\_\_\_\_\_  
Address

**Plantation, FL 33317**

\_\_\_\_\_  
City, State and Zip Code

**SPHILLIPPS@SASFL.COM**

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**SARAH PHILLIPPS**

**954**

**993-0964**

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$105.00 Filing Fees

☐ \$113.75 Filing Fees  
and Certificate of  
Status

☒ \$113.75 Filing Fees  
and Certified Copy

☐ \$122.50 Filing Fees,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Charter Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

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

**Certificate of Conversion**

For

**"Other Business Entity"**

Into

**Florida Profit Corporation**

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13 MAY 28 AM 9:50

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Secure Access and Surveillance, LLC

- L 070000 77470

Enter Name of Other Business Entity

Limited Liability Company

2. The "Other Business Entity" is a \_\_\_\_\_

(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

Florida

first organized, formed or incorporated under the laws of \_\_\_\_\_

(Enter state, or if a non-U.S. entity, the name of the country)

July 27, 2007

on \_\_\_\_\_

Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

n/a

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

Secure Access and Surveillance, Inc

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 21 day of May, 2013.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

Printed Name: Sarah Philipps Title: Director  
Sarah Philipps

**Required Signature(s) on behalf of Other Business Entity:** [See below for required signature(s).]

Signature: *[Signature]*  
Printed Name: Sarah Philipps Title: Director

Signature: *[Signature]*  
Printed Name: Richard Philipps Title: President

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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TALLAHASSEE FLORIDA

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

**FILED**

**ARTICLE I    NAME**            Secure Access and Surveillance, Inc

The name of the corporation shall be: \_\_\_\_\_

13 MAY 28 AM 9:50

**ARTICLE II    PRINCIPAL OFFICE**

The principal place of business/mailling address is:

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Principal street address

Mailing address, if different is:

7027 W. Broward Blvd #235

Plantation, FL 33317

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

Intergrated Security System Services

**ARTICLE IV    SHARES** 100

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Sarah Phillipps/Director

Name and Title: \_\_\_\_\_

Address: 7027 W. Broward Blvd #235

Address: \_\_\_\_\_

Plantation, FL 33317

Name and Title: Richard Phillipps/President

Name and Title: \_\_\_\_\_

Address: 7027 W. Broward Blvd #235

Address: \_\_\_\_\_

Plantation, FL 33317

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: Sarah Phillipps

Address: 7027 W. Broward Blvd #235

Plantation, FL 33317

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Sarah Phillipps  
Address: 7027 W. Broward Blvd #235  
Plantation, FL 33317

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TALLAHASSEE FLORIDA

\*\*\*\*\*

*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

5/21/13  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any 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

5/21/13  
Date