

P 140000009494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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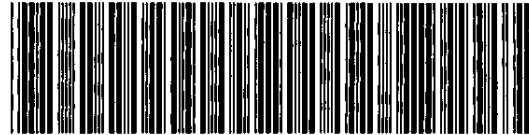
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 24 AM 9:01

2/3/14

COVER LETTER

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

SUBJECT: Treasure Coast Protection, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Jorge F. Granadillo
Name (Printed or typed)

144 SW Dalton Circle
Address

Port Saint Lucie, FL 34953
City, State & Zip

(772) 342.9713
Daytime Telephone number

Granadillo69@yahoo.com
E-mail address: (to be used for future annual report notification)

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

14 JAN 24 AM 9:02

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DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Treasure Coast Protection, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

144 SW Dalton Circle
Port Saint Lucie, FL 34953

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To install security systems including burglar, fire alarm and surveillance cameras.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jorge F. Granadillo / P.

Address: 144 SW Dalton Cir.
Port Saint Lucie, FL 34953

Name and Title: Jorge F. Saavedra / VP.

Address: 6915 NW Hershey Cir.
Port Saint Lucie, FL 34983

Name and Title: Liset Granadillo / T.

Address: 144 SW Dalton Cir.
Port Saint Lucie, FL 34953

Name and Title: Carmen I. Saavedra / S.

Address: 6915 NW Hershey Cir.
Port Saint Lucie, FL 34983

Name and Title:

Address:

Name and Title:

Address:

(conti)

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:

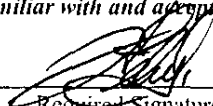
Name: Jorge F. Granadillo
Address: 144 SW Dalton Circle
Port Saint Lucie, FL 34953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carmen I. Saavedra
Address: 6915 NW Hershey Circle
Port Saint Lucie, FL 34983.

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

01-21/14

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

01-21-14

Date

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