

P 15000007385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

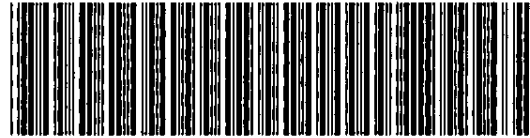
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15 JAN 20 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/27/15

## COVER LETTER

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

SUBJECT: **Accurate Detective Agency, 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: **Dean Durning**

Name (Printed or typed)

**P.O. Box 6847**

Address

**Warwick, RI 02887**

City, State & Zip

**800-841-1213**

Daytime Telephone number

**dean@accurate-investigations.com**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 JAN 20 PM 4: 00

FILED

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 22, 2015

DEAN DURNING  
POST OFFICE BOX 6847  
WARWICK, RI 02887

SUBJECT: ACCURATE DETECTIVE AGENCY  
Ref. Number: W15000004672

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

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 415A00001344

FILED  
15 JAN 20 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Accurate Detective Agency, Inc

FILED

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2306 Windsor Oaks Ave.

Lutz, FL. 33549

Mailing address, if different is:

Box 6847

Warwick, RI 02887

15 JAN 20 PM 4: 00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

To conduct private investigations

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: Dean Durning

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

Address Box 6847

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

Warwick, RI 02887

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

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

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: Charles D. Clark  
Address: 2306 Windsor Oaks Avenue  
Lutz, FL 33549

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Dean Duening  
Address: Box 6847  
Worwich RP 02887

*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*

Charles D. Clark  
Required Signature/Registered Agent

1-5-15  
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.*

Dean Duening  
Required Signature/Incorporator

1-11-15  
Date

FILED  
15 JAN 20 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA