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(Red	questor's Name)	<del></del>		
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	of Status		
Special Instructions to F	Filing Officer:			

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## COVER LETTER

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

Parking Patrol Services, Inc.

	(PROPOSED CORPOR	IATE NAME – <u>MUST INCL</u> I	<u>UDE SUFFIX</u> )		
Enclosed are an	original and one (1) copy of the a	rticles of incorporation and	d a check for:		
☐ \$70.0 Filing Fe	· · · · · · · · · · · · · · · · · · ·	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED		
FROM:		me (Printed or typed)			
	757 S.E. 17th Street, Suite 211				
		Address			
	Fort Lauderdale, Fla. 33316				
	Cit	ty, State & Zip	· · · ·		
	954-448-6096				
	Daytime	Telephone number			
	Awhite316@comcast.net				

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

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

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

CLE II PRI			
ng Patrol Samir	Principal street address es, Inc.	Mailing a	ddress, if different is:
.E. 17 th Street			
Lauderdale, fl. 3	3316	<u></u>	
Ourpose for which	POSE h the corporation is organized is:	r Parking lots.	
			<u> </u>
TICLE IV SHA	ARES 100 of stock is:		
number of shares  TICLE V INI  Name and 1	TIAL OFFICERS AND/OR DIRECTOR:  Title:  757 S.F. 17th Street, Suite 211	S Name and Title:	
number of shares	TIAL OFFICERS AND/OR DIRECTOR:  Title:  757 S.E. 17th Street, Suite 211	Name and Title:	
number of shares  TICLE V INI  Name and 1	TIAL OFFICERS AND/OR DIRECTOR:  Title:  757 S.F. 17th Street, Suite 211	S Name and Title:	
number of shares  TICLE V INI  Name and 1	TIAL OFFICERS AND/OR DIRECTOR:  Title:  757 S.E. 17th Street, Suite 211	S Name and Title:	<u>₹</u> 8 5
number of shares  TICLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTOR: Title:  Ashley White President  757 S.E. 17th Street, Suite 211  Fort Lauderdale, fl. 33316	S Name and Title:Address:	15 iUs
number of shares  TICLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTOR:  Title:  757 S.E. 17th Street, Suite 211	S Name and Title:Address:	SECULO - 7
number of shares  TICLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTOR: Title:  Ashley White President  757 S.E. 17th Street, Suite 211  Fort Lauderdale, fl. 33316	Name and Title:  Address:  Name and Title:	ALTER SEE.
Name and T	TIAL OFFICERS AND/OR DIRECTOR:  Title: Ashley White President  757 S.E. 17th Street, Suite 211  Fort Lauderdale, fl. 33316  itle:	Name and Title:  Address:  Name and Title:	SECRETARY OF SEASON
Name and T	TIAL OFFICERS AND/OR DIRECTOR:  Title: Ashley White President  757 S.E. 17th Street, Suite 211  Fort Lauderdale, fl. 33316  itle:	Name and Title:  Address:  Name and Title:	SECRETARY OF SEE. TO
Name and T Address  Address	TIAL OFFICERS AND/OR DIRECTOR:  Title: Ashley White President  757 S.E. 17th Street, Suite 211  Fort Lauderdale, fl. 33316  itle:	Name and Title:  Address:  Name and Title:  Address:	SECULARIA DE STAR
Name and T Address  Address	TIAL OFFICERS AND/OR DIRECTOR:  Title: Ashley White President  757 S.E. 17th Street, Suite 211  Fort Lauderdale, fl. 33316  itle:	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	SECULARIA DE STAR

Name a	nd Title:	Name and Title:
Addres	s	Address:
	REGISTERED AGENT	Nastalia manimum di nasura in
Name:	Florida street address (P.O. Box NOT acceptable Ashley White	e) of the registered agent is:
Address:	757 S.E. 17th Street, Suite 211	
	Fort Lauderdale, Fl. 33316	
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	uddress of the Incorporator is:	
Name;	Ashley White	
Address:	757 S.E. 17th Street, Suite 211	I Company of the comp
	Fort Lauderdale, Fl. 33316	<u>ම</u> ස
Effective date, if (If an effective days after the f	iling.)	nnot be more than five business days prior or 90 business  ble statutory filing requirements, this date will not be listed as
Having been na this certificate, 1	med as registered agent to accept service of pro am familiar with and accept the appointment as Required Signature/Registered Agent	cess for the above stated corporation at the place designated in registered agent and agree to act in this capacity  2315  Date
I submit this do document to the	·	are true. I am aware that the false information submitted in a
Reau	ired Signature/Incorporator	Date

# **COVER LETTER**

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

UBJECT:	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
nclosed are an	original and one (1) copy of the ar	ticles of incorporation and	d a check for:
☐ \$70.9 Filing F		□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	
		1	
FROM		ne (Printed or typed)	
FROM	Nam		
FROM	Nam 757 S.E. 17th Street , Suite 211  Fort Lauderdale, Fla. 33316  City 954-448-6096	ne (Printed or typed)	

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

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

Lauderdale, fl. 33316  ICLE III PURPOSE Durpose for which the corporation is organized is:  Monitor Parking lots.  ICLE IV SHARES 100 number of shares of stock is:				
Lauderdale, fl. 33316  ICLE III PURPOSE purpose for which the corporation is organized is:  Monitor Parking lots.  Monitor Parking lots.  ICLE IV SHARES number of shares of stock is:  ICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: Address  Ashley White President Address:  Fort Lauderdale, fl. 33316  Name and Title:  Name and Title: Address  Address  Address:  Address:  Address:  Address:  Address:  Address:	WE I MUIOL DOLLICOS	Principal street address	Mailing address, if di	fferent is:
PICLE IV SHARES number of shares of stock is:    State		-		
Purpose for which the corporation is organized is:    One	_auderdale, fl. 333	316		
Name and Title:  Address  Name and Title:  Address  Name and Title:  Address  Name and Title:  Address  Name and Title:  Address:  Address:  Name and Title:  Address:  Address:  Address:  Address:	CLE III PURP urpose for which	<u>OSE</u> the corporation is organized is: Monito	or Parking lots.	
Name and Title:  Address  Name and Title:  Address  Name and Title:  Address  Name and Title:  Address  Fort Lauderdale, fl. 33316  Name and Title:  Address  Address  Address  Address:  Address:  Address:				
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Name and Title:  Address  Name and Title:  Address  Name and Title:  Address  Name and Title:  Address:  Name and Title:  Address:  Address:  Address:  Address:	CLE IV SHAR	FS		
Name and Title:  Address  757 S.E. 17th Street, Suite 211 Address:  Fort Lauderdale, fl. 33316  Name and Title:  Name and Title:  Address:  Address:  Address:	umber of shares of			
Name and Title:  Address  757 S.E. 17th Street, Suite 211  Fort Lauderdale, fl. 33316  Name and Title:  Name and Title:  Address:  Name and Title:  Address:  Address:	CIEV MUTI	AL OFFICEDS AND/OD DIDECTOR	r.	
Address  Fort Lauderdale, fl. 33316  Name and Title:  Address  Name and Title:  Address:			_	
Name and Title:  Address  Address:				
Address: Address:		Fort Lauderdale, fl. 33316		
Address: Address:				
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	No LTM			
Name and Title: Name and Title:			Address:	
			Address:	· · · · · · · · · · · · · · · · · · ·
Address Address:	Address		Address:	

name ar	nd litte:	Name and Title:
Address	· · ·	Address:
ARTICI F VI	REGISTERED AGENT	
	lorida street address (P.O. Box NOT acceptab	le) of the registered agent is:
Name:	Ashley White	
Address:	757 S.E. 17th Street, Suite 211	
	Fort Lauderdale, Fl. 33316	<u> </u>
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	
Name:	Ashley White	
Address:	757 S.E. 17th Street, Suite 211	
	Fort Lauderdale, Fl. 33316	·····
Effective date, if (If an effective of days after the fine the Note: If the date	ling.)	annot be more than five business days prior or 90 business table statutory filing requirements, this date will not be listed as
Having been nar this certificate, I	med as registered agent to accept service of pro am familiar with and accept the appointment a Required Signature/Registered Agent	ocess for the above stated corporation at the place designated in a registered agent and agree to act in this capacity    S   3   15     Date
I submit this doc document to the	cument and affirm that the facts stated herein Department of State constitutes a third degree j	are true. I am aware that the false information submitted in felony as provided for in s.817.155, F.S.
Delle	ley Ulub ired Signature/Incorporator	8 3 5