

P15000080266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

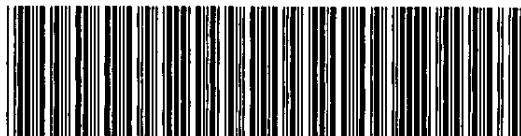
(Document Number)

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08/10/15--01019--009 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 SEP 28 PM 1:16

APPROVED
AND
FILED

1/11

COVER LETTER

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

Aviation Security Technologies Group (ASTG), Inc.

SUBJECT: _____

(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: Pete J Mortellaro
Name (Printed or typed)
14610 Dartmoor Lane
Address
Tampa, FL 33624
City, State & Zip
813-453-8818
Daytime Telephone number
pmort269verizon.net
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2015

PETE J MORTELLARO
14610 DARTMOOR LANE
TAMPA, FL 33624

SUBJECT: AVIATION SECURITY TECHNOLOGIES GROUP (ASTG) INC.
Ref. Number: W15000054834

We have received your document for AVIATION SECURITY TECHNOLOGIES GROUP (ASTG) INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 815A00017223

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

APPROVED
AND
FILED

ARTICLE I NAME

Aviation Security Technologies Group, Inc.

The name of the corporation shall be: _____

15 SEP 28 PM 1:17

ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14610 Dartmoor Lane

Tampa, FL 33624

ARTICLE III PURPOSE

To provide professional services and technical support for the aviation

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pete J Mortellaro / Pres.

Name and Title: _____

Address 14610 Dartmoor Lane

Address: _____

Tampa, FL 33624

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

APPROVED
AND
FILED

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

_____ SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: _____
Pete J Mortellaro
Address: _____
14610 Dartmoor Lane
Tampa, FL 33624

ARTICLE VII INCORPORATOR

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

Name: _____
Pete J Mortellaro
Address: _____
14610 Dartmoor Lane
Tampa, FL 33624

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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
9/21/15
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.

Required Signature/Incorporator
9/21/15
Date