

P 16000018326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

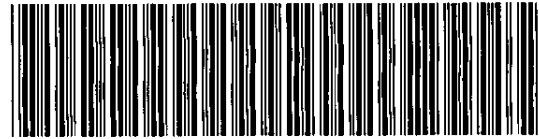
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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STATE  
OF CALIFORNIA

2/29/16

## COVER LETTER

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

**SUBJECT:** Bulldog International Security 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:** Arnold Pasillas  
Name (Printed or typed)  
709 Cape Coral Parkway West  
Address  
Cape Coral, FL 33914  
City, State & Zip  
562-433-8678  
Daytime Telephone number  
msrida@msn.com  
E-mail address: (to be used for future annual report notification)

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

February 13, 2016

Department of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Reference: Bulldog International Security Inc Document Number P13000019630

Dear Processor:

It has come to my attention that my annual report was neglected to be filed and therefore my corporation has been dissolved.

At this time I would ask the state to release my document number P13000019630 for my corporation Bulldog International Security Inc. under my authority as the acting President of this corporation.

I am also enclosing articles of incorporation that I would like the state to process at this time.

Thanking you for your assistance in taking care of these matters.

Sincerely,



Arnold Pasillas , President

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STATE OF FLORIDA  
TALLAHASSEE

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

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**ARTICLE I NAME**

The name of the corporation shall be: Bulldog International Security Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

709 Cape Coral Parkway West

6985 Silk Oak Court

Cape Coral, FL 33914

Las Vegas, NV 89148

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful activities pertaining to security guard.

**ARTICLE IV SHARES**

The number of shares of stock is: 100 shares @ 1.00 par value per share

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

Name and Title: Arnold Pasillas, President

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

Address 6985 Silk Oak Court

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

Las Vegas, NV 89148

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: Lawrence Swan

Address: 709 Cape Coral Parkway West

Cape Coral, FL 33914

**ARTICLE VII INCORPORATOR**

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

Name: Arnold Pasilla

Address: 6985 Silk Oak Court

Las Vegas, NV 89148

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CLERK OF THE COURT  
STATE OF FLORIDA  
TALLAHASSEE

**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

2/13/16  
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

2/13/2016  
Date