

**P160001462913**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
BLUE KNIGHTS PROTECTIVE SERVICES, INC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

*06/17/16*

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06/16/2016 13:04

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06/16/2016 12:30:48 PM PAGE

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Fax Server



June 16, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LAZARUS

SUBJECT: BLUE KNIGHTS PROTECTION SERVICES, INC.  
REF: W16000043507

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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 use whole numbers only. Remove the percentage symbol from the document.

If you have any further questions concerning your document, please call (850) 245-6052.

Matthew T Moon  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H16000146291  
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Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of Blue Knights Protective Services Doc # P11000019215 are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.

Very Sincerely,

ROLAND  
FONGON

16 JUN 16 PM 12:50

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SECTION 1  
JUN 16 2016  
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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

H16000146291

**ARTICLE I NAME:** The name of the corporation is:BLUE KNIGHT PROTECTIVE SERVICES, INC.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

8000 NW 31st St #19  
Doral FL 33122

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SECRETARY OF STATE  
JUN 16 2016**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**ROLAND FONGON PRESIDENT  
GEORGE LEVY VICE PRESIDENT**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

ROLAND FONGON  
8000 NW 31st St #19  
Doral FL 33122**ARTICLE VI INCORPORATOR:** The name and address of the incorporator is:ROLAND FONGON  
8000 NW 31st St #19  
Doral FL 33122

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Required Signatures:

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

Registered Agent

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 § 817.155, F.S.

Incorporator

Date

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