

P/6000083405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

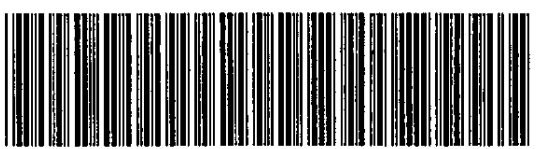
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200291080712

10/14/16--01009--016 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE FILINGS
2016 OCT 14 PM 2:15

10/17/16

COVER LETTER

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

SUBJECT: Warrior International Services 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Richard Griffin

Name (Printed or typed)

PO Box 523

Address

Seneca Falls, NY 13148

City, State & Zip

407-417-7551

Daytime Telephone number

rgriffin608@yahoo.com

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

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)

ARTICLE I NAME

The name of the corporation shall be: Warrior International Services Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

593 S. Anchor Drive

Deltona, FL 32725

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Teaches the concept of advanced security operations

ARTICLE IV SHARES

The number of shares of stock is: 1000 common shares at par value \$.01

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Richard Griffin

Name and Title: N/A

Address: President / Director / Officer

Address:

593 S. Anchor Drive

Deltona, FL 32725

Name and Title: N/A

Name and Title: N/A

Address:

Address:

Name and Title: N/A

Name and Title: N/A

Address:

Address:

2018 OCT 16 PM 2:15

FILED
IN THE OFFICE OF THE
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE, FLORIDA

(conti.)

Name and Title: N/A Name and Title: N/A
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

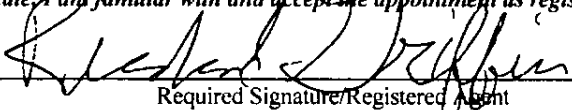
Name: Richard Griffin
Address: 593 S. Anchor Drive
Deltona, FL 32725

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Richard Griffin
Address: 593 S. Anchor Drive
Deltona, FL 32725

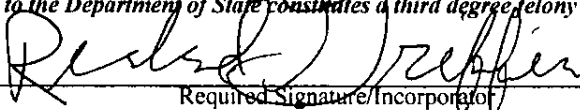
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

10/11/2016

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

10/11/2016

Date

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