

**Electronic Articles of Incorporation  
For**

P17000072423  
FILED  
August 29, 2017  
Sec. Of State  
cmwood

LOSS PREVENTION PROFESSIONALS INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:

LOSS PREVENTION PROFESSIONALS INC

**Article II**

The principal place of business address:

1070 MONTGOERY RD.  
ALTAMONTE SPRINGS, FL. US 32714

The mailing address of the corporation is:

1070 MONTGOERY RD.  
ALTAMONTE SPRINGS, FL. US 32714

**Article III**

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The number of shares the corporation is authorized to issue is:

100

**Article V**

The name and Florida street address of the registered agent is:

ANGELA DICKENS  
1070 MONTGOMERY RD.M  
ALTAMONTE SPRINGS, FL. 32714

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: ANGELA DICKENS

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## **Article VI**

The name and address of the incorporator is:

ANGELA DICKENS  
1070 MONTGOMERY RD.

ALTAMONTE SPRINGS, FL 32714

Electronic Signature of Incorporator: ANGELA DICKENS

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
ANGELA DICKENS  
1070 MONTOMERY RD.  
ALTAMONTE SPRINGS, FL. 32714 US

## **Article VIII**

The effective date for this corporation shall be:

08/25/2017