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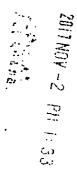
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COVER LETTER

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

SUBJECT:	tegic Security Management Consulting (PROPOSED CORPOR.	lne. ATE NAME – <u>MUST INCL</u> I	UDE SUFFIX)		
Enclosed are an	original and one (1) copy of the ar	ticles of incorporation and	l a check for:		
□ \$70.0 Filing Fo		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		
FROM:	William S. Marcisz	ne (Printed or typed)	et in the state of		
	3120 Park Meadow Drive				
	Арорка, Florida 32703	Address			
City, State & Zip 407 912-1326					
Daytime Telephone number Bill.Marcisz@StrategicSecurityManagement.com					
	E-mail address: (to be us	ed for future annual report i	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)

FICLE II PRINCIPAL OFFICE Principal street address O Park Meadow Drive		Mailing addre	Mailing address, if different is:	
pka, Florida 32703				
ICLE III PURP	OSE To conduct the corporation is organized is:	t business as a Security Consultin	ng firm.	
			87	
ICLE IV SHAR number of shares of	ES 10 stock is:		And the second s	
ICLE V <u>INI</u> TIA	AL OFFICERS AND/OR DIRECTORS		**	
Name and Titl	William S. Marcisz, President	Name and Title:	<u>့</u> ယ	
Name and Titl Address	William S. Marcisz, President e:	Address:	ω	
Address	William S. Marcisz, President e: 3120 Park Meadow Drive Apopka, Florida 32703	Address:	<u>ω</u>	
	William S. Marcisz, President e: 3120 Park Meadow Drive Apopka, Florida 32703	Address: Name and Title:	<u>ω</u>	
Address Name and Title	William S. Marcisz, President e: 3120 Park Meadow Drive Apopka, Florida 32703	Address: Name and Title: Address:	ω	
Address Name and Title Address	William S. Marcisz, President e: 3120 Park Meadow Drive Apopka, Florida 32703		ω	

Name un	d Title:	Name and Title:	
Address	· · · · · · · · · · · · · · · · · · ·	Address:	
	<u>REGISTERED AGENT</u> 	les of the registered agent is:	
Name:	William S. Marcisz	ic) of the regimened agent in	
Address:	3120 Park Meadow Drive		
	Apopka, Florida 32703		
			
ARTICLE VII	<u>INCORPORATOR</u>		
The name and a	ddress of the Incorporator is:		
Name:	William S. Marcisz		
Address:	3120 Park Meadow Drive		
	Apopka, Florida 32703		
	<u>EFFECTIVE DATE:</u> January 1, 2018 other than the date of filing:	(OPTIONAL)	
	late is listed, the date must be specific and c	annot be more than five days pr	ior or 90 days after the
•	: inserted in this block does not meet the applic	rable statutory filing requirements	this date will not be listed as
	flective date on the Department of State's reco		
Having been nai	med as registered agent to accept service of pr	ocess for the above stated corporc	ution at the place designated in
this certificate, I	am familiar with and accept the appointment of	ns registered agent and agree to ac	et in this capacity
1/			10/30/17
	Required Signature/Registered Agent		Date
I submit this document to the	cument and affirm that the facts stated herein Department of State constitutes a third degree	are true. I am aware that the fa felony as provided for in s.817.15;	lse information submitted in a 5, F.S.
/1/	~		10/70/17
Requ	ired Signature/Incorporator		Date

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