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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

(]

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019

: (305)552-5973

Phone Fax Number

: (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION

Security Aguillas Guardianes Certificate of Status Certified Copy Page Count 03 \$78.75 Estimated Charge

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LAZARUS CORPORATE

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September 7, 2018

FLORIDA DEPARTMENT OF STATE

LAZARUS CORPORATE FILING SERVICES, INC.

SUBJECT: SECURITY AGUILAS GUARDIANES

REF: W18000080211

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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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

Brooke N Malchow OPS New Filing Section FAX Aud. #: E18000258273 Letter Number: 818A00018509

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Security Aguilas Guardianes	Inc	
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is: 3725 Sw 153 ct Huami Fl 33185.	- -	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS;	- 	
ARTICLETV INITIAL DIRECTORS AND/OR OFFICERS:	ria (P)
	2018 SEP SEURET	
	7 A	9 771
	AM 10: 10	O
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDR	dess:	
The name and Florida street address (PO Box not acceptable) of the registered: Rolando Martinez Santaman		
3725 SW 153 CT		
Migmi FL 33185		
ARTICLE VI INCORPORATOR: The name and address of the Incorpo	rator is:	
Rolando Martinez Santama	7119	
3725 SW 153 CT		
Migmi FC 3318		
H 1 8 0 0 0	125827	3

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

Rogistered 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 s.817.155, F.S.

Hostingal @ Date

2018 SEP - 7 AM 10: 1
SECRETARY OF STA