

P19000037719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

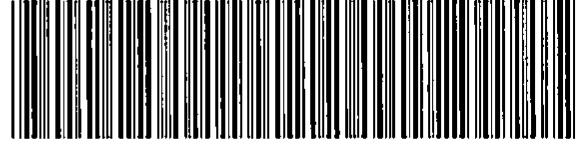
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2019 MAY -7 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05/08/19--01002--004 **140.00

19 MAY -7 PM 3:42
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

MAY 08 2019

K Brumpley

Sondate Research
Requester's Name

Address

City/State/Zip

Phone #

656-5454

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S). (If known):

1. American Remote Video Inc
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time

☐ Mail out

☐ Will wait

☒ Photocopy

☐ Certified Copy

☐ Certificate of Status

NEW FILINGS

- ☒ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A. Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

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: American Remote Video, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

176 Viera Drive

Palm Beach Gardens, Florida 33418

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Security Consulting

ARTICLE IV SHARES

The number of shares of stock is: 1,000 No Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lawrence Dolin, President & Director

Name and Title:

Address

176 Viera Drive

Address:

Palm Beach Gardens, Florida 33418

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2019 MAY -7 AM 9:15
-SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Lawrence Dolin

Address: 176 Viera Drive

Palm Beach Gardens, Florida 33418

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Lawrence Dolin

Address: 176 Viera Drive

Palm Beach Gardens, Florida 33418

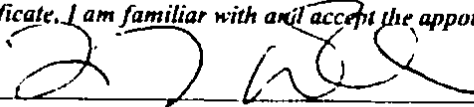
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

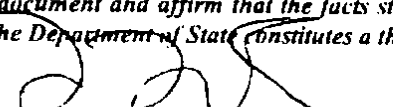
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

5/6/19
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

5/6/19
Date