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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
INVESTIGATIVE PROTECTION SERVICE GROUP, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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CORPORATIONS
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: INVESTIGATIVE PROTECTION SERVICE GROUP, INC**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address142 EAST 45 STREETHIALEAH, FL 33013

Mailing address, if different is:

142 EAST 45 STREETHIALEAH, FL 33013**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: SHARES: 100 @ \$1.00**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ROBERTO CHAVEZ - P

Name and Title: _____

Address 142 EAST 45 STREET

Address: _____

HIALEAH, FL 33013

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ROBERTO CHAVEZ
Address: 142 EAST 45 STREET
HIALEAH, FL 33013

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: ROBERTO CHAVEZ
Address: 142 EAST 45 STREET
HIALEAH, FL 33013

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

/s/ Roberto Chavez
Required Signature/Registered Agent

04/18/2022
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.

/s/ Roberto Chavez
Required Signature/Incorporator

04/18/2022
Date

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CLERK OF COURT
HIALEAH, FL