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SECRETARY OF STATE
TALLARIASSEE, FL

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

The name of the corp	ME oration shall be: Empire Sec	virty and a	Safety Group	INC
ARTICLE II PRINCIPAL OFFICE Principal street address 247 John Kopi Surfe 101		J	Mailing address, if different is:	
ABTICLE III DIL	See FL 32303			
The purpose for which	th the corporation is organized is: 100	provide Se	cority	
and suf	ety Services,	,		
ARTICLE IV SHA	ARES of stock is: 500			
ARTICLE V INIT	TIAL OFFICERS AND/OR DIRECTORS	ì		
Name and T	ille: Tammy Price Presid	cot Name and Title:		
Address	P.O. Bex 130 673	Address:		
	Tallahassee, FL 3231			·- <u></u>
	de: Valerie Stewart - V-Pr			
Address	P.O.BOX 180673	Address:	(2)	26
	Tallahassee, FL		TAR	2023
	32318			Ž ,
Name and Tit	le:	Name and Title	9/2 2/2 2/3/2	Q (100)
			471 T/4	
Address		Address:		<u> </u>
		<u> </u>	·	

Name and Title:	Name and Title:	
Address	Address:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Bo	ox NOT acceptable) of the registered agent is:	
Name: Tommy Price		
Address: 2780 Hartsfr	reld Rd.	
Tallahussee,	FL 32303	2023 . SEC TA
ARTICLE VII INCORPORATOR		JAN -6 RETAR
The name and address of the Incorporator is:		** *** ****
Name: Joinmy Pr	ice	SERVICE CO
Name: Joinmy Pr. Address: 2780 Hart	Stield Rd.	PM 12: 04 SSEE, FL
Tallahusse	e FL. 32303	ra *
ARTICLE VIII EFFECTIVE DATE:		
Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be filing.)	e specific and cannot be more than five days pric	or or 90 days after the
Note: If the date inserted in this block does not	t meet the applicable statutory filing requirements.	this date will not be listed as
the document's effective date on the Departmen	nt of State's records.	
Having been named as registered agent to accept certificate, I am familiar with and accept the ap-	of service of process for the above stated corporation pointment as registered agent and agree to act in thi	at the place designated in this
		1/06/23
Required Signature/R	Registered Agent	Date
I submit this document and affirm that the fac	cts stated herein are true. I am aware that the fals.	e information submitted in a
_ (^)	a third degree felony as provided for in s.817.155, I	
Required Signature/Incorporator	Date	1/06/23