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Division of Corporations

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From:

Account Name : VCORP SERVICES, LLC

Account Number : I2008000067

: (845)425-0077

Phone Fax Number

: (845)818-3588

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

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

<u>ICLE II - PRIN</u>	<u>'CIPAL OFFICE</u>		
	Principal street address 3, Palm Beach Gardens, FL, 33410	900 Sout	Mailing address, if different is: th Avenue Suite 200 States Island NY 10314
FICLE III PURI purpose for which	the corporation is organized is: <u>Security G</u>	uard Services	
TICLE IV SHAI	f stock is: 100		1 2023 JU
	c: Marlane H Carrabba (President)	_ Name and Title	Brandon Carrabba (Secretary/CFO)
Address	117 S Reiroad Street Staten Island NY 10312		2 Chase Court Millstone Township NJ 08810
		_ Address:	in s
	Vincent Carrabba (Vice President)	Address:	E, EL
	Vincent Carrabba (Vice President) 117 S Railroad Street Staten Island NY 10312	Name and Title	E, EL
Name and Title Address	117 S Railroad Street Staten Island NY 10312	Name and Title Address:	E STATE
Name and Title Address		Name and Title Address:	E, L'

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of	6d
Name: C T Corporation System	tille registered agent is:
Address: 1200 South Pine Island Road, Plantation,	-
FL 33324	-
	-
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	1 21
Name; Michele Ramos	
Address: 900 South Avenue Suite 200 Staten Island NY 103	TILED TO A CF
	NS 2 111
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot filing)	(OPTIONAL)
filing.)	to the more than five days prior or 90 days often the
<u>Note:</u> If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	,
Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as register.	or the above stated corporation at the place designated in this ed agent and agree to act in this capacity
C T Composition System	se Bell, Assistant Secretary 05/23/2023
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree felony	true. I am aware that the false information submitted in a
g.	
Required Signature/Incorporator	Date 5 (25)