

P45000011228

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB - 8 AM 8:12

SUBJECT: UNIVERSAL ALARM CORPORATION 700001401957
-02/09/95--01070--004
(Proposed corporate name - must include suffix) *****78.75 *****78.75

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: WILLIAM E. HENRY
Name (printed or typed)
5950 BENT PINE DRIVE #149
Address
ORLANDO, FL 32822
City, State & Zip
407-438-4104
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

UNIVERSAL ALARM CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5950 BENT PINE DRIVE #149
ORLANDO, FL 32822

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES OF COMMON STOCK.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

UNIVERSAL ALARM CORPORATION
WILLIAM E. HENRY
5950 BENT PINE DRIVE #149
ORLANDO, FL 32822

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SECRETARY OF STATE
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ARTICLE V INCORPORATOR(S)

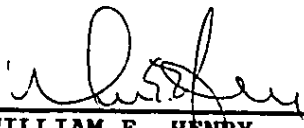
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

WILLIAM E. HENRY, PRESIDENT
UNIVERSAL ALARM CORPORATION
5950 BENT PINE DRIVE #149
ORLANDO, FL 32822

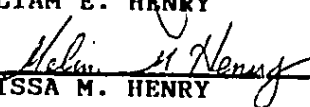
MELISSA M. HENRY, SECRETARY
UNIVERSAL ALARM CORPORATION
5950 BENT PINE DRIVE #149
ORLANDO, FL 32822

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

6th. day of FEBRUARY, 1995.



WILLIAM E. HENRY Signature PRESIDENT



MELISSA M. HENRY Signature SECRETARY

Signature

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: UNIVERSAL ALARM CORPORATION

2. The name and address of the registered agent and office is:

WILLIAM E. HENRY

(Name)

5950 BENT LANE DRIVE #149

(P.O. Box not acceptable)

ORLANDO, FL 32822

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

William E. Henry
(Signature)

2-6-95
(Date)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 18 AM 8:12

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM **APPROVED AND FILED**

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

96 SEP 17 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000011228.

1 Corporation Name

UNIVERSAL ALARM CORPORATION

Principal Place of Business

13030 San Diego Woods Ln.
Orlando, FL 32824

Mailing Address

13030 San Diego Woods
Orlando, FL 32824

800001951098
-09/19/96--01011--0003
***383.75 ***383.75

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

13030 San Diego Woods

Suite, Apt. #, etc.

3. New Mailing Address, if Applicable

13030 San Diego Woods

Suite, Apt. #, etc.

City & State

Orlando, FL

Zip

32824

Country

USA

City & State

Orlando, FL

Zip

32824

Country

USA

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified
To Do Business in Florida

February, 8, 1995

5. FEI Number

59-3290813

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	WILLIAM E. HENRY	13030 San Diego Woods Ln	Orlando, FL 32824
S	MELISSA M. HENRY	13030 San Diego Woods Ln	Orlando, FL 32824

REINSTATEMENT

8. Name and Address of Current Registered Agent

WILLIAM E. HENRY
13030 San Diego Woods Lane
Orlando, FL 32824

9. Name and Address of New Registered Agent

Name
WILLIAM E. HENRY
Street Address (P.O. Box Number is Not Acceptable)
13030 San Diego Woods Lane
Suite, Apt. #, Etc.
City
Orlando
State
FL
Zip Code
32824

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date
9-15-96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM E. HENRY

9-15-96 407-888-2887
Date Daytime Phone #