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TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: ACE INDUSTRIES, INC.
54 NW 11TH ST
MIAMI FL 33136-2090 0-1422
CONTACT: LYNN FRIEDMAN
PHONE: (305) 350-2571
FAX: (305) 350-7832

((H95000002504)) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: FINIGON SECURITY SERVICES, INC.
FAX AUDIT NUMBER: H95000002504 CURRENT STATUS: REQUESTED
DATE REQUESTED: 03/03/1995 TIME REQUESTED: 14:15:03
CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0
NUMBER OF PAGES: 1 METHOD OF DELIVERY: FAX
ESTIMATED CHARGE: $122.50 ACCOUNT NUMBER: 070744001530

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((H95000002504))
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H95-2504

ARTICLES OF INCORPORATION

of FINISON SECURITY SERVICES, INC.
a CORPORATION FOR PROFIT formed under the Florida General Corporation Act.

Article 1: Name of the Corporation: FINISON SECURITY SERVICES, INC.
Address of the Corporation: 3421 N.W. 7th Ave.
MIAMI, FLORIDA 33128.

Article 2: DURATION: Term of existence of the corporation is perpetual.

Article 3: PURPOSE: The Corporation may transact any and all lawful business for which corporations may be incorporated under the Laws of the UNITED STATES and the STATE OF FLORIDA.

Article 4: CAPITAL STOCK: The number of shares which the corporation has authorized to be outstanding at any one time is 1,000,000.
PAR VALUE 1.00 (Information about PAR VALUE is not required but may be included).

Article 5: REGISTERED OFFICE: The street address of the initial registered office of the corporation shall be:
3421 N.W. 7th AVE., MIAMI, FLORIDA 33128,
and the name of the initial registered agent at such address is LAWRENCE GBARANBIRI OGIONWO.

I am familiar with and hereby accept the duties and responsibilities as registered agent for said corporation _____ 3-3-95.
Signature of Registered Agent Date

Article 6: The board of directors are as follows:
The name and address of the Initial Director : (All persons listed after the first are additional directors)
1. LAWRENCE G. OGIONWO 480 N.E. 180th DRIVE, NORTH MIAMI BEACH, FLORIDA 33162

Article 7: The Name and address of the incorporator is:
LAWRENCE G. OGIONWO 480 N.E. 180th DRIVE, NORTH MIAMI BEACH, FLORIDA 33162

In witness whereof I have subscribed my name _____
Signature of Incorporator

H95-2504

ace INDUSTRIES, INC.
54 NW 11th Street
Miami, FL 33136
305-358-2571

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

APPROVED AND FILED

96 OCT 27 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****375.00 ****375.00

DOCUMENT # P95000017737

1. Corporate Name

FINISON SECURITY SERVICES INC.

Principal Place of Business

~~0421 N.W. 7TH AVE.~~
~~MIAMI FL 33128~~
600 N.W. 183RD ST.
SUITE 7B&C
MIAMI, FLORIDA 33169

Mailing Address

~~3421 N.W. 7TH AVE.~~
~~MIAMI FL 33128~~ 600 N.W. 183RD ST.
SUITE 7B&C
MIAMI, FLORIDA 33169

If above addresses are incorrect in any way, line through incorrect information and enter correct information

2. New Principal Office Address, If Applicable
600 N.W. 183RD ST.
Suite, Apt. #, etc.
7B&C
City & State
MIAMI, FLORIDA
Zip 33169 Country DADE

3. New Mailing Office Address, If Applicable
600 N.W. 183RD ST.
Suite, Apt. #, etc.
7B&C
City & State
MIAMI, FLORIDA
Zip 33169 County DADE

REINSTATEMENT 96AD

4. Date Incorporated or Qualified To Do Business in Florida 03/03/1995

5. FEI Number 65-0613692 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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P/D	OGIONWO, LAWRENCE G	~~400 NE 190TH DR.~~ 3421 N.W. 7TH AVENUE	~~N. MIAMI BEACH FL 33162~~ MIAMI, FLORIDA 33128
VP	PIERRE-LOUIS, ROLAND	3421 N.W. 7TH AVENUE	MIAMI, FLORIDA 33128
VP	LEON, RICARDO	3820 N.E. 16TH COURT	N.M.B., FLORIDA 33181
S	PIERRE-LOUIS, MAGDA	15801 N.E. 2ND AVENUE	N. MIAMI BEACH, FL 33162
VP	OGIONWO, ORONIE	3421 N.W. 7TH AVENUE	MIAMI, FLORIDA, 33128
VP	IBISI, ROSALYNE	20445 N.W. 37TH COURT	CAROL CITY, FL. 33056

8. Name and Address of Current Registered Agent

OGIONWO, LAWRENCE G
3421 N.W. 7TH AVENUE
MIAMI FL 33128

9. Name and Address of New Registered Agent

Name OGIONWO, LAWRENCE G
Street Address (P.O. Box Numbers Not Acceptable) 3421 N.W. 7TH AVENUE
Suite, Apt. #, Etc. 7B
City MIAMI State FL Zip Code 33128

CR2E040 (7/96)

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 9/20/96

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 certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. 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., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. 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: LAWRENCE G. OGIONWO 9/20/96 (305)655-0770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0051837 AF