

# P95000061382

## TRANSMITTAL LETTER

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

SUBJECT: SECURED INC.  
(Proposed corporate name - must include suffix)

100001554711  
-06/08/95--01040--017  
\*\*\*\*\*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

Additional Copy Required

FROM: WILLIAM F SILVIA  
Name (printed or typed)

140 MARK DAVID BLVD  
Address

CASSELLBERRY, FL 32707  
City, State & Zip

407-834-9571  
Daytime Telephone number

AUG 9 1995 BSB

FILED  
95 AUG -7 AM 11:10

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

FILED  
ARTICLES OF INCORPORATION 95 AUG -7 AM 11:10

*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:

SECURED INC

ARTICLE II PRINCIPAL OFFICE

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

140 MARK DAVID BLVD  
CASSELBERRY, FL 32707

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIAM F. SILVIA  
140 MARK DAVID BLVD  
CASSELBERRY, FL 32707

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

TINA LE  
1024 PIONEER DR  
DELTONA, FL 32725

WILLIAM F. SILVA  
140 MARK DAVID BLVD  
CASSELBERY, FL 32707

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

3 day of AUGUST, 19 95

William F. Silva  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: SECURED INC.

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

WILLIAM F SILVIA  
(NAME)

140 MARK DAVID BLYD  
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)

CASSELBERRY, FL 32707  
(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 F. Silvia  
(SIGNATURE)

Aug 3, 95  
(DATE)

FILED  
95 AUG -7 4:11:10

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