

896000055460

TRANSMITTAL LETTER

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

907001871748
-06/21/96--01102--011
*****70.00 *****70.00

SUBJECT: SECURE WINDOW SYSTEMS, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and 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: JAMES SELLARS
Name (printed or typed)
6234 SMALLWOOD ROAD
Address
JACKSONVILLE FLORIDA 32216
City, State & Zip
(904) 724-0693
Daytime Telephone number

FILED
96 JUN 27 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/16-13342
6/21/96
FD

502

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 24, 1996

JAMES SELLARS
6234 SMALLWOOD ROAD
JACKSONVILLE, FL 32216

SUBJECT: SECURE WINDOW SYSTEMS, INC.
Ref. Number: W96000013343

We have received your document for SECURE WINDOW SYSTEMS, INC. and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6878.

Terri Buckley
Corporate Specialist

Letter Number: 296A00031200

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

SECURE WINDOW SYSTEMS, INC.

ARTICLE II PRINCIPAL OFFICE

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

118 JACKSON ROAD, SUITE 2
JACKSONVILLE, FLORIDA 32225

ARTICLE III SHARES

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

7500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JAMES SELLARS
118 JACKSON ROAD, SUITE 2 6234 SMALLWOOD RD
JACKSONVILLE, FLORIDA 32225 32216

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TALLAHASSEE, FLORIDA

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):

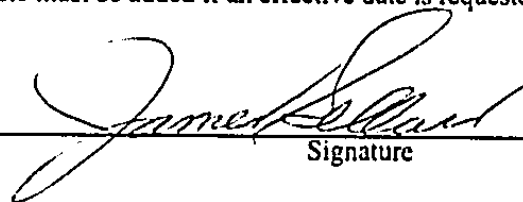
Helen Sellars, President
6234 Smallwood Road
Jacksonville, Florida 32216

James Sellars, Vice President, Secretary/Treasurer
6234 Smallwood Road
Jacksonville, Florida 32216

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

20th day of JUNE, 19 96.

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

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: SECURE WINDOW SYSTEMS, INC.

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

JAMES SELLARS
(NAME)

6234 SMALLWOOD RD

118 JACKSON ROAD, SUITE 2

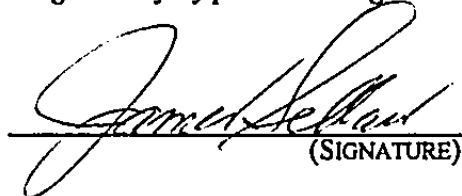
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

JACKSONVILLE, FLORIDA 32216

(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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.


(SIGNATURE)

6-20-96
(DATE)