

P96000086048

TRANSMITTAL LETTER

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

SUBJECT: TROPICAL SYSTEMS FOR SECURITY, INC.  
(Proposed corporate name - must include suffix)

000001973470--0  
-10/18/96--01016--014  
\*\*\*\*\*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: LENNY BRUCATO

Name (Printed or typed)

7855 SADDLE CREEK TRAIL

Address

SARASOTA, FLORIDA 34241

City, State & Zip

941-925-3147

Daytime Telephone number

FILED  
96 OCT 17 AM 8:54  
TALLAHASSEE, FLORIDA

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

10-18-96  
KR

## 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:

TROPICAL SYSTEMS FOR SECURITY, INC.

### ARTICLE II PRINCIPAL OFFICE

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

7855 SADDLE CREEK TRAIL  
SARASOTA, FLORIDA 34241

### ARTICLE III SHARES

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

100 SHARES @ \$1.00 PAR VALUE

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LENNY BRUCATO  
7855 SADDLE CREEK TRAIL  
SARASOTA, FLORIDA 34241

**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):

PRESIDENT: LENNY BRUCATO  
7855 SADDLE CREEK TRAIL  
SARASOTA, FL. 34241

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

15TH day of OCTOBER, 1996.

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

  
\_\_\_\_\_  
LENNY BRUCATO 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: TROPICAL SYSTEMS FOR SECURITY, INC.
2. The name and address of the registered agent and office is:

LENNY BRUCATO  
(NAME)

7855 SADDLE CREEK TRAIL  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

SARASOTA, FLORIDA 34241  
(CITY/STATE/ZIP)

FILED  
OCT 17 AM 6:54  
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)

OCTOBER 15, 1996  
(DATE)