CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (904) 224-8870 • 1-800-342-8062 • Fax (904) 222-1222

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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Date

Will Pick Up

Signature

Name

Walk-In

	Art of Inc. File	
	LTD Partnership File	
	Foreign Corp. File	
	L.C. File	
	Fictitious Name File	
	Name Reservation	
	Merger File	
	Art. of Amend. File	
	RA Resignation	
	Dissolution / Withdrawal	
	Annual Report / Reinstatement	
	Cert. Copy	
	Photo Copy TVV 97	
	Certificate of Good Standing	•
	Certificate of Status	
	Certificate of Fictitious Name	
	Corp Record Search	
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	Fictitious Owner Search	į
	Vehicle Search	
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ļ	UCC 1 or 3 File	٠
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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 15, 1997

CAPITAL CONNECTION, INC. 417 E. VIRGINIA ST. STE. 1 TALLAHASSEE, FL 32302

SUBJECT: HOS ALARMS, INC. Ref. Number: W97000016273

We have received your document for HOS ALARMS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent must sign accepting the designation.

Please return the original and one copy of 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 (850) 487-6929.

Randall Purintun Document Specialist

Letter Number: 797A00036134

SECRETARY OF STATE DIVISION OF CORPORATIONS

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ARTICLES OF INCORPORATION OF HOB ALARMS, INC.

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

ARTICLE I

The name of the corporation is:

HOS ALARMS, INC.

ARTICLE II

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

11811 SW 18 Street, Unit #4 Miami, Florida 33175

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any time is 100 having a par value of \$1.00 per share.

ARTICLE IV

The name and address of the initial registered agent of the corporation is:

David Yelen, Esq. 1104 Ponce de Leon Boulevard Coral Gables, Florida 33134

ARTICLE V

The name and street address of the incorporator to these Articles of Incorporation is:

David Yelen, Esq. 1104 Ponce de Leon Boulevard Coral Gables, Florida 33134

ARTICLE VI

The shareholders shall have the preemptive right to acquire unissued or treasury shares or securities convertible or carrying the right to subscribe to or acquire shares of the Corporation.

The shares of other corporations or going businesses may be purchased by the Corporation in return for the issuance of its capital stock and said purchase shall be on such basis and for such consideration and the issuance of such amounts of capital stock as the Directors may determine. All such acquisitions shall be ratified by the shareholders before they shall be effective.

The undersigned has executed these Articles of Incorporation this 14th day of July, 1997.

DAVID YELEN

SECRETARY OF STATE
DIVISION OF CORPORATIONS

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

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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 HOS ALARMS, INC.
- 2. The name and address of the registered agent and office is

David Yelen, Esq. 1104 Ponce de Leon Boulevard Coral Gables, Florida 33134

DAVID YELEN, Incorporator

7/15/97

Date

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.

DAVID VELEN

Date