

P98000083042

TRANSMITTAL LETTER

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

300002646853--5
-09/23/98--01023--010
*****78.75 *****78.75

SUBJECT: IN-SITE SECURITY AND INVESTIGATION, INC.
(Proposed corporate name - must include suffix)

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: ROBERT J. NOTARIANNI
Name (Printed or typed)

4840 N. UNIVERSITY DR.
Address

LAUDERHILL FL 33351
City, State & Zip

954-572-3926
Daytime Telephone number

FILED
98 SEP 23 AM 8:02
SECRETARY OF STATE
TALLAHASSEE, FL 32304

60
9/25

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

ARTICLES OF INCORPORATION

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 NAME

The name of the corporation shall be:

IN-SITE SECURITY AND INVESTIGATIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

4840 N. UNIVERSITY DR.
LAUDERHILL, FL. 33351

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ROBERT J. NOTARIANNI
4840 N. UNIVERSITY DR.
LAUDERHILL, FL. 33351

ARTICLE V INCORPORATOR

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

ROBERT J. NOTARIANNI
4840 N. UNIVERSITY DR.
LAUDERHILL, FL. 33351


Signature/Incorporator

9/21/98
Date

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

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/Registered Agent

9-21-98
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA