

TRANSMITTAL LETTER

P99000008016

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

300002751143--2
-01/22/99--01043--001
*****87.50 *****87.50

SUBJECT: Fort Knox Security Systems, 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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Michael A. Collins
Name (Printed or typed)
2351 Asaph Court
Address
Land O'Lakes, Florida 34639
City, State & Zip
1-888-766-3733
Daytime Telephone number

FILED
99 JAN 22 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F. CHESSEY JAN 27 1999

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: Fort Knox Security Systems, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8510 County Road 54
New Port Richey, Florida 34653

ARTICLE III SHARES

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

1000 shares (one thousand)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

John H. Witmer
14502 Brentwood Drive
Tampa, Florida 33618

ARTICLE V INCORPORATOR

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


Michael A. Collins
2351 Asaph Court
Land O'Lakes, Florida 34639


Signature/Incorporator

1-19-99
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

January 19, 1999
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA