

Charter Number Only

7000028073983

Donkley & Associates

Requestor's Name

717 Ponce de Leon

Address

Coral Gables, FL 33134

City

State

ZIP

Phone

4460 C

NON ONLY

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*****78.75 *****78.75

CORPORATION(S) NAME

Miami Dade Protective Group, INC.



Empire Toll Free: 1-800-432-3028

99 MAR 16 AM 11:09
SECRETARY OF STATE
TALAHASSEE FLORIDA

FILED

☒ Profit
☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

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Availability	
Document	
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Acknowledgment	
W.P. Verifier	

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

OF

Miami Dade Protective Group, Inc.

ARTICLE I - NAME

The name of the corporation is Miami Dade Protective Group, Inc.

ARTICLE II - DURATION

This Corporation is to exist perpetually.

ARTICLE III - PURPOSE

This Corporation is organized to engage in any act or business permitted under the laws of the United States of America and the State of Florida.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 7,500 shares of common stock with a par value of one dollar (\$1.00) per share.

ARTICLE V - PREEMPTIVE RIGHTS

Every, shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENTS

The street address of the initial registered office and principle place of business of this corporation is 13800 SW 8th St. # 348, Miami, Florida 33184 and the name of the initial registered agent of this corporation at that address is Lindsay Dunkley.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have Two (2) director initially.

The number of directors may either be increased or diminished from time to time by the bylaws, but shall never be less than one (1).

the name and address of the initial director of this corporation is:

NAME	ADDRESS
Rosalia Díaz Sehwerert (President)	13800 SW 8th St # 348 Miami, Florida 33184

ARTICLE VIII - INCORPORATOR

The name and address of the incorporator is:

NAME	ADDRESS
Lindsay Dunkley	13800 SW 8th St # 348 Miami, Florida 33184

ARTICLE IX - BYLAWS

The power to adopt, alter, amend or repeal bylaws shall be vested in the board of directors.

ARTICLE X - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE XI - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereof, and any right conferred upon the shareholders is subject to this reservation.

Executed by the undersigned Incorporator this 08th, day of
March 1999.

Rosalia Diaz Schwerert
Rosalia Diaz Schwerert

STATE OF FLORIDA)
 : SS
COUNTY OF DADE)

The foregoing Articles of Incorporation was acknowledged before me
this 08th day of March, 1999, by Lindsay Dunkley.

NOTARY PUBLIC
State of Florida at Large

My Commission Expires:

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICES OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED;

FIRST: THAT MIAMI DADE PROTECTIVE GROUP, INC. DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH IT'S PRINCIPAL PLACE OF BUSINESS AT COUNTY OF DADE, STATE OF FLORIDA, HAS NAMED LINDSAY DUNKLEY AT 13800 SW 8TH ST. # 348 MIAMI, FLORIDA 33184 AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE:

Rosalia Diaz Schwerert
Rosalia Diaz Schwerert

TITLE: INCORPORATOR

DATE: MARCH 08, 1999

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I
HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY
WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND
COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE:

Rosalía Díaz Schwerert
Rosalía Díaz Schwerert

DATE: MARCH 08, 1999

99 MAR 16 AM 11:09
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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