## TRANSMITTAL LETTER

Department of State Division of Corporations

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P. O. Box 6327 Tallahassee, FL 3231	4 SECR	ETARY OF FLORIDA AHASSEE, FLORIDA	7000 <u>0</u> 2806 -03/15/990 *****78.75	
SUBJECT:		Sandhill Security Corporation  (Proposed corporate name - must include suffix)		
Enclosed is an origina  \$70.00 Filing Fee	al and one(1) copy of the articl  \$78.75 Filing Fee  & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Claudia F. M Name (P	CKim	PY REQUIRED	
	HCR 134 HUV	4.4.1		

HUR TOA HMA 44T Address Canal Point, FL. 33438 City, State & Zip (561) 924-9654 Daytime Telephone number

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

PH3/22/99/

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.	FILED
ARTICLE I NAME The name of the corporation shall be:  Sandhill Security Corporation  SE	MAR 15 AN 9:32 CRETARY OF STATE LLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:  HCR 134 HWY 441  Canal Point, FL. 33438	- - -
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding	at any one time is:
500	<del>-</del> -
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADD The name and Florida street address of the initial registered agent are:  Claudia E. McKim HCR 134 HWY 441 Canal Point, FL. 33438  ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:  Claudia E. McKim HCR 134 HWY 441 Canal Point, FL. 33438	RESS
Signature factor potator	<b>Date</b> 

(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

Date