

Division of Corporations

Page 1 of 2

P2000007743

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H20000349523 3)))



H20000349523ABC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : THE TAX GROUP INC  
Account Number : I20180000051  
Phone : (305) 223-4648  
Fax Number : (786) 361-1360

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
SECRET PROTECTION INC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$70.00 |

J. FASON

OCT 08 2020

FILED

2020 OCT -7 AM 9:30

2020 OCT -7 PM 1:52

H 2000349523 3

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**The name of the corporation shall be: SECRET PROTECTION INC**ARTICLE II PRINCIPAL OFFICE**Principal street address15486 SW 23RD LANEMIAMI, FL 33185

Mailing address, if different is:

15486 SW 23RD LANEMIAMI, FL 33185**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: GENERAL TRANSPORTATION**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ARMANDO LABRADOR, P

Name and Title: \_\_\_\_\_

Address 15486 SW 23RD LANE

Address: \_\_\_\_\_

MIAMI, FL 33185

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
2020 OCT -7 AM 9:30  
SECRETARY OF STATE

H 2000349523 3

H/20000349523 3

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ARMANDO LABRADOR  
 Address: 15486 SW 23RD LANE  
MIAMI, FL 33185

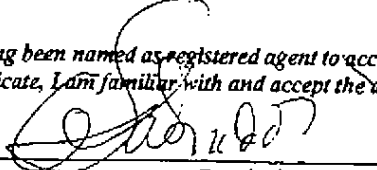
**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: ARMANDO LABRADOR  
 Address: 15486 SW 23RD LANE  
MIAMI, FL 33185

**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: 10/07/2020 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

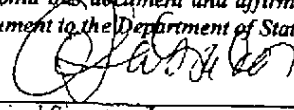
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
 \_\_\_\_\_  
 Required Signature/Registered Agent

10/07/2020

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
 \_\_\_\_\_  
 Required Signature/Incorporator

10/07/2020

Date

H/20000349523 3

FILED  
 2020 OCT - 7 AM 9:30  
 DEPT. OF STATE  
 CORP. DIVISION  
 TALLAHASSEE, FL