DOC ID ----> 200909001464

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
04/01/2009	200909001464	DOMESTIC ARTICLES/FOR PROFIT (ARF)	125.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

MUSCLE NATIONAL AUTO
P.O. BOX 98
MADISON, OH 44057

STATE OF OHIO

CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1847091

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

PRECISION ALARMTECH, INC.

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
DOMESTIC ARTICLES/FOR PROFIT	**200909001464**

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 30th day of March, A.D. 2009.

Ohio Secretary of State

DOC ID ----> 200909001464

Prescribed by:

Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.sos.state.oh.us
e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the Following:

- ○ Yes — PO Box 1390, Columbus, OH 43216 — *** Requires an additional fee of $100 ***
- ◉ No — PO Box 670, Columbus, OH 43216

2009 JAN 23 AM 11:48

INITIAL ARTICLES OF INCORPORATION

(For Domestic Profit or Nonprofit)
Filing Fee $125.00

2009 FEB -9 AM 9:08

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) ☑ Articles of Incorporation Profit (113-ARF) ORC 1701	(2) ☐ Articles of Incorporation Nonprofit (114-ARN) ORC 1702	(3) ☐ Articles of Incorporation Professional (170-ARP) Profession _____ ORC 1785

Complete the general information in this section for the box checked above.

FIRST: Name of Corporation: Precision AlarmTech, Inc.

SECOND: Location: Madison *(City)* Lake *(County)*

Effective Date **(Optional)** _____ *(mm/dd/yyyy)* ***Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.***

☐ ***Check here if additional provisions are attached***

Complete the information in this section if box (2) or (3) is checked. Completing this section is optional if box (1) is checked.

THIRD: Purpose for which corporation is formed

Complete the information in this section if box (1) or (3) is checked.

FOURTH: The number of shares which the corporation is authorized to have outstanding (Please state if shares are common or preferred and their par value if any) 100 *(No. of Shares)* common *(Type)* $1.00 per share *(Par Value)*

(Refer to instructions if needed)

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Completing the information in this section is optional

FIFTH: The following are the names and addresses of the individuals who are to serve as initial Directors.

David E. Brooks
(Name)

1399 Ormond Ave.
(Street) ***NOTE: P.O. Box Addresses are NOT acceptable.***

Madison | Ohio | 44057
(City) | *(State)* | *(Zip Code)*

(Name)

(Street) ***NOTE: P.O. Box Addresses are NOT acceptable.***

(City) | *(State)* | *(Zip Code)*

(Name)

(Street) ***NOTE: P.O. Box Addresses are NOT acceptable.***

(City) | *(State)* | *(Zip Code)*

REQUIRED
Must be authenticated **(signed)** by an authorized representative
(See Instructions)

D E Brooks — 11-21-08
Authorized Representative — Date
David E. Brooks
(print name)

Authorized Representative — Date
(print name)

Authorized Representative — Date
(print name)

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Complete the information in this section if box (1) (2) or (3) is checked.

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of Precision AlarmTech, Inc. hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is

David E. Brooks
(Name)
1399 Ormond Ave.
(Street) ***NOTE: P.O. Box Addresses are NOT acceptable.***
Madison , **Ohio** 44057
(City) *(Zip Code)*

Must be authenticated by an authorized representative

Dul E Brooks Authorized Representative	11-21-08 Date
Authorized Representative	Date
Authorized Representative	Date

ACCEPTANCE OF APPOINTMENT

The Undersigned, David E. Brooks, named herein as the Statutory agent for, Precision AlarmTech, Inc., hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: Dul E Brooks
(Statutory Agent)