DOC ID ----> 201520903032

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/28/2015	201520903032	DOMESTIC FOR PROFIT CORP - ARTICLES (ARF)	125.00	100.00	0.00	0.00	0.00

Receipt

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

ROLCIK LAW OFFICE
8859 CINCINNATI DAYTON ROAD
SUITE 201
WEST CHESTER, OH 45069

STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Jon Husted
2414968

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

PCS SECURITY SOLUTIONS, INC.

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

Document(s)	Document No(s):
DOMESTIC FOR PROFIT CORP - ARTICLES	**201520903032**

Effective Date: 08/01/2015

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 28th day of July, A.D. 2015.

Jon Husted

Ohio Secretary of State

DOC ID ----> 201520903032

Form 532A Prescribed by:
JON HUSTED
Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Date Electronically Filed: 7/28/2015

Initial Articles of Incorporation

(For Profit, Domestic Corporation)

Filing Fee: $125

(113 - ARF)

First: Name of Corporation: PCS Security Solutions, Inc.
(Name must include the following word or abbreviation: company, co., corporation, corp., incorporated, or inc.)

Second: Location of Principal office in Ohio
CINCINNATI (City) OHIO (State)
HAMILTON (County)

Effective Date **(Optional)**: 8/1/2015 (mm/dd/yyyy)
(The legal existence of the corporation begins upon the filing of the articles or on a later date specified that is not more than ninety days after filing)

Third: 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.)

1000	COMMON	0
Number of Shares	**Type**	**Par Value**

Fourth: If the corporation is to have an initial stated capital, please state the amount of that stated capital

0 (Amount)

****Note: ORC Chapter 1701 allows additional provisions to be included in the Articles of Incorporation that are filed with this office. If including any of these additional provisions, please do so by including them in an attachment to this form.****

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of PCS Security Solutions, 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

KAREN A. ROLCIK
Name

8859 CINCINNATI DAYTON ROAD, SUITE 201
Mailing Address

WEST CHESTER | OHIO | 45069
City | State | Zip Code

Must be signed by the Incorporators or a majority of the incorporators

KAREN A. ROLCIK
Signature

Signature

Signature

ACCEPTANCE OF APPOINTMENT

The Undersigned, KAREN A. ROLCIK , named herein as the
Statutory Agent Name

Statutory agent for PCS Security Solutions, Inc.
Corporation Name

hereby acknowledges and accepts the appointment of statutory agent for said corporation.

Statutory Agent Signature KAREN A. ROLCIK

Individual Agent's Signature/Signature on Behalf of Business Serving as Agent

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required
Articles and original appointment of agent must be signed by the incorporator(s).

If the incorporator is an individual, then they must sign in the "signature" box and print his/her name in the "Print Name" box.

If the incorporator is a business entity, not an individual, then please print the entity name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print his/her name and title/authority in the "Print Name" box.

KAREN A. ROLCIK
Signature

By

Print Name

Signature

By

Print Name

Signature

By

Print Name

DOC ID ----> 201520903032

Form 590 Prescribed by:
JON HUSTED
OHIO SECRETARY OF STATE
Toll Free: (877) SOS-FILE (877-767-3453)
Central Ohio: (614) 466-3910
www.OhioSecretaryofState.gov
busserv@OhioSecretaryofState.gov
File online or for more information: www.OHBusinessCentral.com

Consent for Use of Similar Name

(To be filed with new business formation document or amendment to change business name where a name conflict will occur.)

Name of Entity/Individual Giving Consent: PCS Security Solutions, LLC

Charter/Registration/License Number of Entity giving Consent: 2315873

Gives it Consent To: PCS Security Solutions, Inc.

To Use The Name: PCS Security Solutions, Inc.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

REQUIRED
Consent form must be signed by an authorized representative of the consenting entitiy.

Signature

By (if applicable)

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

Karen A. Rolcik
Print Name

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Signature

By (if applicable)

Print Name