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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.
Account Number : I20070000019
Phone : (518) 689-1212
Fax Number : (518) 432-0742

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

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
BURBANK SECURITY SERVICES INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
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TALLAHASSEE, FLORIDA

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TOM GRADY
COMMISSIONER

STREET ADDRESS: 101 East Gaines Street, Suite 636 - PHONE (850) 410-9800 - FAX (850) 410-9548
MAILING ADDRESS: Division of Financial Institutions, 200 East Gaines Street, Tallahassee, FL 32399-0371
Visit us on the web: www.FLDOFR.com - Toll Free: (800) 848-3792

November 28, 2011

Alexander Almonte, Esq.
119 Washington Avenue, Suite 101
Albany, NY 12210

Re: Burbank Security Services Inc.

Dear Mr. Almonte:

Thank you for your recent letter/fax requesting approval for use of the above-referenced name.

It is the opinion of this Office that the above-referenced corporate name is definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Office does not object to your use of the above-referenced name being registered to conduct business in the state of Florida. However, this does not give one the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Linda B. Charity
Director

LBC:bk

cc: Karon Beyer, Chief, Bureau of Commercial Recordings, Division of Corporations,
Department of State

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FINANCIAL SERVICES COMMISSION

RICK SCOTT
GOVERNOR

PAM BONDI
ATTORNEY
GENERAL

JEFF ATWATER
CHIEF FINANCIAL
OFFICER

ADAM PUTNAM
COMMISSIONER OF
AGRICULTURE

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. BURBANK SECURITY SERVICES INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW YORK 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/14/11 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON FILING
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8 TRAPPER LANE, LEVITTOWN, NY 11756
(Principal office address)
8 TRAPPER LANE, LEVITTOWN, NY 11756
(Current mailing address)

8. SECURITY SERVICES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

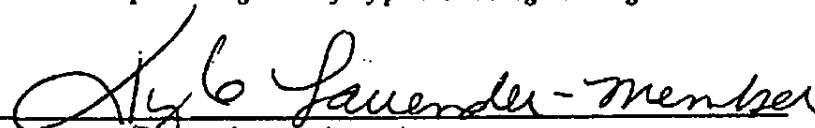
Name: USA-RA LLC

Office Address: 841 PRUDENTIAL DRIVE, 12TH FLOOR

JACKSONVILLE, Florida 32207
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: ARMANDO FUENTES

Address: 8 TRAPPER LANE, LEVITTOWN, NY 11756

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: ARMANDO FUENTES

Address: 8 TRAPPER LANE, LEVITTOWN, NY 11756

Vice President: _____

Address: _____

Secretary: _____

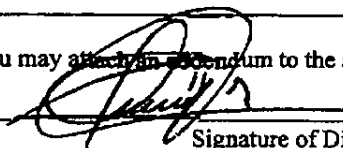
Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____



Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. ARMANDO FUENTES, PRESIDENT

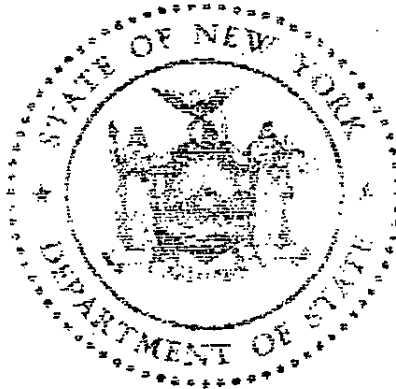
(Typed or printed name and capacity of person signing application)

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**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of BURBANK SECURITY SERVICES INC. was filed on 03/14/2011, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 08th day of November two thousand and eleven.

First Deputy Secretary of State

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