

## CERTIFICATE OF AUTHORITY OF

SPECIAL PROTECTION, INC.

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that
duplicate originals of an Application of SPECIAL PROTECTION, INC.
for a Certificate of Authority to transact business in this State
duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have
been received in this office and are found to conform to law.
ACCORDINGLY and by virtue of the authority vested in me by law. I issue this Certificate of
Authority toSPECIAL PROTECTION, INC.
to transact business in this State under the name SPECIAL PROTECTION. INC.
and attach hereto a duplicate original of the Application
for such Certificate.

Dated November 13, 1990



SECRETARY OF STATE

Corneration Clerk

APPLICAT	ION FOR CERTII	FICATE OF AUT	HORITY
,	(Profit Corp	oration)	SECONOU
o the Secretary of State of Idal	10		SEC.
Pursuant to Section 30-1-1. Authority to transact business in	10, Idaho Code, the under your State, and for that p	signed Corporation hereb urpose submits the follow	oy applies for a Ceffficate of ving statement:
1. The name of the corporation	is Special Prote	ction, Inc.	Pa Ta
•			<b>7</b> m
2. The name which it shall use i	n Idaho isSpecial	Protection, Inc	
(To be used only when requ Board of Directors resolution			. Must be accompanied by a
3. It is incorporated under the l	aws of Washingto	n	
f The data of its incommentation	:. 10-31-85		and the period 😭 itseduration
4. The date of its incorporation	15		
Perpetual	•		S. M. S.
5. The address of its principal of	office in the state or countr	y under the laws of which	
			it is incorporated is
5605 W Metaline			
6. The address to which corres	•	•	in item 5.
P.O. Box 286, He	ermiston, OR 978	38	
7. The street address of its prop	osed registered office in Ida	thois Rt. 3, Box	29
Buhl, ID 83316	osou registered office in the	***************************************	
			and the name of its proposed
registered agent in Idaho at t	hat address is Sharon	Brenden	-
B. The purpose or purposes wh			ess in Idaho are:
Unarmed Security	Guards		
			With the second
The names and respective ac	dresses of its directors and	d officers are:	
Name	Office	A	ddress
J. Jay Bryan	President	720 E. Ouince.	Hermiston, OR 9783
Bryan O. Stockdale			
Jawn F. Stockdale	Sec/Treas.	Minnehaha Road	. Hermiston. OR 978
	***************************************		
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., <sup>\*</sup>

	Office	Address
		<u> </u>
	<del></del>	
	***************************************	
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		• *
0. The corporation accepts and	I shall comply with the provis	ions of the Constitution and the laws of the State o
	simili compiy with the provis	ions of the Constitution and the laws of the State of
Ida <u>Ho</u> .		
and i		
1. This Application is accompa	nied by a certificate of Corpo	prate Status or Existence, duly authenticated by the
1. This Application is accompany proper officer of the sta	e or country under the l	orate Status or Existence, duly authenticated by the aws of which it is incorporated.
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This Application is accompany proper officer of the star	e or country under the leading of th	aws of which it is incorporated.  Protection, Inc.
1. This Application is accompany proper officer of the sta	e or country under the 1 990 Special	aws of which it is incorporated.  Protection, Inc.
1. This Application is accompany proper officer of the sta	Special  By	Protection, Inc. (Corporation Name)
This Application is accompany proper officer of the star	Special  By  and	Protection, Inc. (Corporation Name)  President/Vice President (please specify)
11. This Application is accompanded proper officer of the sta	Special  By  and	Protection, Inc. (Corporation Name)
TATE OF Oregon	By	Protection, Inc. (Corporation Name)  President/Vice President (please specify)
TATE OF Oregon	By	Protection, Inc. (Corporation Name)  President/Vice President (please specify)
TATE OF Oregon  COUNTY OF Umatilla	By Special  By Its  and Its  ) ss:	Protection, Inc. (Corporation Name)  President/Vice President (please specify)  Secretary/Assistant Secretary (please specify)
TATE OF Oregon  COUNTY OF Umatilla  I, Susan R. Edson	By Special  and Its  ) ss:	Protection, Inc. (Corporation Name)  Sepresident/Vice President (please specify)  Secretary/Assistant Secretary (please specify)  , a notary public, do hereby certify that on
This Application is accompanded proper officer of the star Dated: November 1, 1:  STATE OF Oregon  COUNTY OF Umatilla  I, Susan R. Edson  his 1st d	By	Protection, Inc. (Corporation Name)  Bresident/Vice President (please specify)  Secretary/Assistant Secretary (please specify)  , a notary public, do hereby certify that on  , 1990, personally appeared before
This Application is accompanded proper officer of the star Dated: November 1, 1:  STATE OF Oregon  COUNTY OF Umatilla  I, Susan R. Edson  his 1st d	By	Protection, Inc. (Corporation Name)  Bresident/Vice President (please specify)  Secretary/Assistant Secretary (please specify)  , a notary public, do hereby certify that on  , 1990, personally appeared before
OTATE OF Oregon  COUNTY OF Umatilla  I, Susan R. Edson  his lst d  J. Jay Bryan	By Special By Its and Its ) ss:  ay of November	Protection, Inc. (Corporation Name)  Separate President (please specify)  Www. Blockdalk

Susan R. Edson Notary Public



SEC. OF STATE

## STATE of WASHINGTON SECRETARY of STATE

I, Ralph Munro, Secretary of State of the State of Washington and custodian of its seal, hereby certify that, according to records on file in this office, as of the date of this certificate,

SPECIAL PROTECTION, INC.

is a

Washington profit

corporation,

duly authorized to transact business or conduct affairs as a corporation in the State of Washington.

Date: Oct

October 25, 1990

Corporation Number:

2-367211-6

Date of Incorporation October 31, 1985

or Qualification:

Given under my hand and the seal of the State of Washington, at Olympia, the State Capitol.

Raiph Munro, Secretary of State