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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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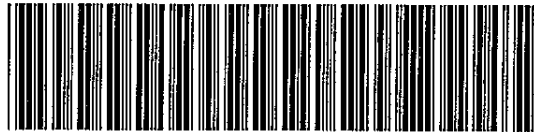
(Business Entity Name)

(Document Number)

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**FILED**  
**Jul 25, 2003 08:00 AM**  
**Secretary of State**

7-30-03

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: J. THOMAS Graham Consulting Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Tom Graham  
Name (Printed or typed)

2692 W. VINA DEL MAR BLVD  
Address

ST. PETE BEACH FLA, 33706  
City, State & Zip

(727) 215 5779  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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**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:

J THOMAS GRAHAM Consulting Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

2692 W. VINA DEL MAR BLVD  
ST. PETE Bch. FL. 33706

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Consulting

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

JAMES THOMAS GRAHAM - President

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Tom Graham  
2692 W. VINA DEL MAR BLVD.  
ST. PETE Bch. FLA. 33706


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Tom Graham  
2692 W. VINA DEL MAR BLVD.  
ST. PETE Bch. FLA. 33706

\*\*\*\*\*

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

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

5/29/03  
\_\_\_\_\_  
Date

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

5/29/03  
\_\_\_\_\_  
Date