

P000000009745

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H00000004639 1)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : R.C. UNGER CPA PA
Account Number : I19990000023
Phone : (941) 408-9555
Fax Number : (941) 408-9553

FILED
00 JAN 28 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

Trompe Art Associates, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

N. Culligan JAN 28 2000

(((H00000004639 1)))

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Trompe Art Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1938 Adams Lane
Unit 203
Sarasota, FL 34236

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 (One Thousand) Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

William Blowers
1938 Adams Lane
Unit 203
Sarasota, FL 34236

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

William Blowers
1938 Adams Lane
Unit 203
Sarasota, FL 34236

William F. Blowers
Signature/Incorporator

1/28/2000
Date

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

William F. Blowers
Signature/Registered Agent

1/28/2000
Date

FILED

00 JAN 28 PM 1:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA