TRANSMITTAL LETTER

P00000109953

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

SUBJECT:	Lorenzen, Inc. (Proposed corpo	orate name - must include su	uffix)	
Enclosed is an origin	nal and one(1) copy of the article		DOOO34753 -11/27/0001 *****78.75 check for:	1861—-882 °
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	104 W. Seneca Aven	inted or typed) ue, Suite 59 ddress	OO NOV 27 SECRETARY TALLAHASSE	T
	Tampa, FL 33612 City, S	tate & Zip	7 AN 9: 2 OF STATE EE, FLORIDA	Ö

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

Daytime Telephone number

(813) 935-6884

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:

Lorenzen, Inc.

ARTICLE II PRINCIPAL OFFICE

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

104 W. Seneca Avenue, Suite 59 Tampa, FL 33612

ARTICLE III SHARES

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

1,000,000 Shares of Common Stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kathleen Jane Lorenzen 104 W. Seneca Avenue, Suite 59 Tampa, FL 33612

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Kathleen Jane Lorenzen 104 W. Seneca Avenue, Suite 59 Tampa,FL 33612

Signature/Incorporator

Kathleen Jane Lorenzen

Nov. 20 2000 Date

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

organian or Register ett Agent

Kathleen Jane Lorenzen

Nov. 20 2000

Date