PO3000 125001

(Requestor's Name)	
(A)	_
(Address)	
(Address)	_
(Walissay)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
	_
(Document Number)	
Certified Copies Certificates of Status	
Certified copies Certificates of Status	_
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Special Instructions to Filing Officer.	
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SECREVARY OF STATE



TRANSMITTAL LETTER

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

		ticles of incorporation and	a eneck for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	WILLIAM C. FOWLER		
	Nam	e (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	2428 STATE PARK ROAD		•
		Address	Section 1
	LAKELAND FL 33805-9203	3	
	Cit	y, State & Zip	
	(863) 666-2988		

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

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:

WILLIAM C. FOWLER, INC.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

2428 STATE PARK ROAD LAKELAND FL 33805-9203

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

To engage in the construction, repair and remodeling of buildings and other business and contracting work incidental to or connected with such work.

ARTICLE IV SHARES

The number of shares of stock is:

300 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

WILLIAM C. FOWLER, DIRECTOR 2428 STATE PARK ROAD LAKELAND FL 33805-9203

REGISTERED AGENT

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

WILLIAM C. FOWLER 2428 STATE PARK ROAD LAKELAND FL 33805-9203

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM C. FOWLER 2428 STATE PARK ROAD LAKELAND FL 33805-9203

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

Signature/Incorporator

Date

State of Florida County of Polk

Sworn and subscribed to before me on this 20th day of October

