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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Lowrie Wilson 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: Lowrie Wilson Inc.
Name (Printed or typed)

6444 NW Foxglove Street
Address

Port St. Lucie, Florida 34986
City, State & Zip

(772) 871-9941
Daytime Telephone number

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Lowrie Wilson Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6444 NW Foxglove Street
Port St. Lucie, Florida 34986

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation is organized for the purpose of transacting any or all lawful business under Florida law.

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Lowrie Wilson
6444 NW Foxglove Street
Port St. Lucie, Florida 34986
President/Owner

ARTICLE VI REGISTERED AGENT

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

Lowrie Wilson
6444 NW Foxglove Street
Port St. Lucie, Florida 34986

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Lowrie Wilson
6444 NW Foxglove Street
Port St. Lucie, Florida 34986

****

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 — Date: 03/25/2004

Signature/Incorporator — Date: 03/25/2004

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Signature/Registered Agent — 03/25/2004 Date

Signature/Incorporator — 03/25/2004 Date