

P04000086201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

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

May 25, 2004

**SUBJECT:** C T TROWER CONSULTING INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                            & Certificate of  
                            Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** CHARLES T TROWER  
Name (Printed or typed)  
  
2949 KENSINGTON TRACE  
Address  
  
TARPON SPRINGS, FL 34688  
City, State & Zip  
  
727-943-9708  
Daytime Telephone number

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Please process this application ASP. The reason is we need a copy of the Certified Corporate Charter to file other State of Florida forms that have a soon coming date deadline.

Thank You

**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:

C T TROWER CONSULTING INC

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2949 KENSINGTON TRACE  
TARPON SPRINGS, FL 34688

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUSINESS CONSULTING, FOR PROFIT CORPORATION

### ARTICLE IV SHARES

The number of shares of stock is:

20,000 SHARES OF COMMON STOCK

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

The name(s) and address(es):

CHARLES T TROWER  
2949 KENSINGTON TRACE  
TARPON SPRINGS FL 34688

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### ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

CHARLES T TROWER  
2949 KENSINGTON TRACE  
TARPON SPRINGS, FL 34688

### ARTICLE VII INCORPORATOR

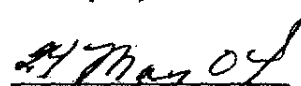
The name and address of the Incorporator is:

CHARLES T TROWER  
2949 KENSINGTON TRACE  
TARPON SPRINGS, FL 34688


\*\*\*\*\*

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

  
Signature/Incorporator

  
Date