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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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1-10

TRANSMITTAL LETTER

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

SUBJECT: ATR Ventures, 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: Alexander T. Rose

Name (Printed or typed)

16560 115th Ave. N.

Address

Jupiter, Florida 33478

City, State & Zip

561-707-6076

Daytime Telephone number

FILED
05 JUN 10 PM 2:48
TALLAHASSEE, FLORIDA
DIVISION OF STATE

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:

ATR Ventures, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

16560 115th Avenue N.
Jupiter, FL 33478

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to provide information technology consulting services to individuals and corporations

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Alexander T. Rose
16560 115th Avenue N.
Jupiter, FL 33478
President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

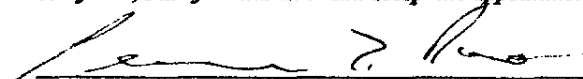
Alexander T. Rose
16560 115th Avenue N.
Jupiter, FL 33478

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Alexander T. Rose
16560 115th Avenue N.
Jupiter, FL 33478

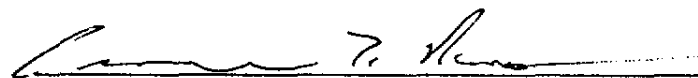
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1/4/05

Date



Signature/Incorporator

1/4/05

Date

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CLERK OF STATE
TALLAHASSEE, FLORIDA