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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

18.5-25

## COVER LETTER

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

SUBJECT: Prowlerz 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: William H. Constant  
Name (Printed or typed)

9348 Bearfoot Trail  
Address

Weeki Wachee, Fl. 34613  
City, State & Zip

352-596-4085  
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)

## **ARTICLE I NAME**

The name of the corporation shall be:

Prowlerz Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

9348 Bearfoot Trail  
Weeki Wachee, Fl. 34613

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Specific purpose for a "Professional Corporation"

## **ARTICLE IV SHARES**

The number of shares of stock is:

100

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

William Constant	:	President
"	"	Treasurer
"	"	Secretary
"	"	Director

## **ARTICLE VI REGISTERED AGENT**

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

William Constant  
9348 Bearfoot Trail  
Weeki Wachee, Fl. 34613

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

William Constant  
9348 Bearfoot Trail  
Weeki Wachee, Fl. 34613

\*\*\*\*\*

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

FILED

06 MAY 24 PM 3:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
Date

  
Date