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Office Use Only



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TRANSMITTAL LETTER

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

SUBJECT: GOWER GOHEEN INSURANCE, 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

□ \$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: GEORGE GOWER

Name (Printed or typed)

204 BEACH DR NE

Address

ST PETERSBURG, FL 33701

City, State & Zip

727-227-2 894-516 Daytime Yelephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 62 1, F. S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

GOWER GOHEEN INSURANCE, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

204 Beach Dr NE, St Petersburg, FL 33701

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Insurance agency

ARTICLE IV

The number of shares of stock is:

100

INITIAL OFFICERS AND/OR DIRECTORS

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

George Gower, President, 204 Beach DR NE, St Petersburg, FL 33701

Don Jenkins, Secretary/treasurer, 204 Beach Dr NE, St Petersburg, FL 33701

ARTICLE VI REGISTERED AGENT

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

George Gower, President, 204 Beach DR NE, St Petersburg, FL 33701

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

George Gower, President, 204 Beach DR NE, St Petersburg, FL 33701

Having been named as registered agent to accept service ofprocessfor the above stated corporation at theplace designated in this certificate, I amfamiliar with and accept the appointment as registered agent and agree to act in this capacity

11-7-2006

Signature/Registered Agent

Date

11-7-2006 Date