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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : M. BURR KEIM COMPANY
Account Number : I19990000242
Phone : (215)563-8113
Fax Number : (215)977-9386

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
12 JUL 20 PM 1:00

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Trowbridge Energy Group Inc.

Certificate of Status	0
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Page Count	03
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Corporate Filing Menu

Help

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SEP 27 2019

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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 Trowbridge Energy Group Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is

143 E Davis Boulevard, Unit 2

Tampa, FL 33606

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is 1000 Shares Par Value \$1.00 Per Share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title James D. Trowbridge, Director

Name and Title James D. Trowbridge, President

Address 143 E Davis Boulevard, Unit 2
Tampa, FL 33606

Address 143 E Davis Boulevard, Unit 2
Tampa, FL 33606

Name and Title James D. Trowbridge, Secretary

Name and Title James D. Trowbridge, Treasurer

Address 143 E Davis Boulevard, Unit 2
Tampa, FL 33606

Address 143 E Davis Boulevard, Unit 2
Tampa, FL 33606

Name and Title

Name and Title

Address

Address

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Name and Title _____	Name and Title _____
Address _____	Address _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name James D Trowbridge

Address 143 E Davis Boulevard, Unit 2
Tampa, FL 33606

19 SEP 26 PM 1:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name James D Trowbridge

Address 143 E Davis Boulevard, Unit 2
Tampa, FL 33606

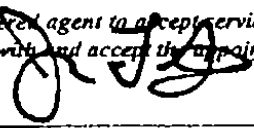
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be the document's effective date on the Department of State's records

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

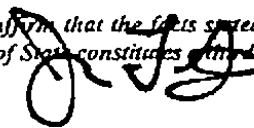


Required Signature/Registered Agent

9/25/2019

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

9/25/2019

Date

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