

686964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300251480213

09/12/13--01018--020 \*\*35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 SEP 12 AM 11:28

FILED

C. LEWIS  
SEP 19 2013  
EXAMINER



