

P03 000 136344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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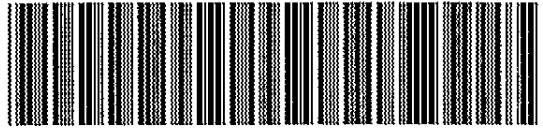
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

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

SUBJECT: C. C. CRAFTERS, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one ³(X) 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: David L. Erickson
Name (Printed or typed)

P O Box 482
Address

Old Town Florida 32680-0482
City, State & Zip

352-542-8768 Office
352-339-0373 Mobile

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:

C. C. CRAFTERS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

SR 349 North 186 NE 711 ST / Post Office Box 482
Old Town Florida 32680 / Old Town Florida 32680

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All legal and licensed enterprises to make a profit.

ARTICLE IV SHARES

The number of shares of stock is:

Seven Hundred shares.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

David L. Erickson	President.
P O Box 482	Treasurer.
Old Town Florida 32680	Director.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

David L. Erickson
186 NE 711 ST
Old Town Florida 32680

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David L. Erickson
P O Box 482
Old Town Florida 32680

ARTICLE VIII EFFECTIVE DATE

The effective date of the articles of incorporation is:

The first day of January, 2004.

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

David L. Erickson

Signature/Registered Agent David L. Erickson

November 7th 2003

Date

David L. Erickson

Signature/Incorporator

David L. Erickson

11-7-2003

Date

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