

MO6000004676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

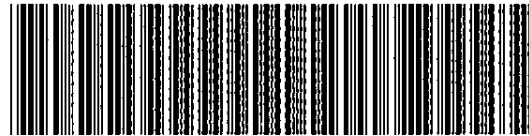
Special Instructions to Filing Officer:

A. LUNT

DEC - 7 2010

EXAMINER

Office Use Only



500188146455

12/06/10--01050--021 **260.00

2010 DEC - 6 AM 19: 54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

