

MU80UU002302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

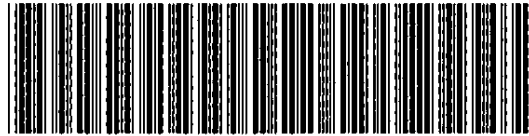
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100128800341

FILED

08 MAY 15 AM 8:55

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

05/16/08--01001--008 **160.00

RECEIVED

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2008 MAY 15 PM 4:44

TO AGENCY FOR
SUFFICIENCY OF FILING

B. KOHR

MAY 16 2008

EXAMINER