

TRANSMITTAL LETTER
P00000003597

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

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-01/06/00--01055--019
*****78.75 *****78.75

SUBJECT: CR Publications, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) 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: Chris Rash
Name (Printed or typed)

P.O. Box 28480

Address

Panama City, FL 32411
City, State & Zip

850 236-9700
Daytime Telephone number

FILED
00 JAN -6 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

1-12
AC

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CR Publications, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

PLACE OF BUSINESS

4203 Bay Point Rd.
Panama City Beach, FL 32408

MAILING

P.O. Box 28480
Panama City, FL 32411

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

one hundredred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

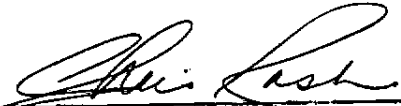
The name and Florida street address of the initial registered agent are:

Chris Rash
4203 Bay Point Rd.
Panama City Beach, FL 32408

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Chris Rash
P.O. Box 28480
Panama City, FL 32411



Signature/Incorporator

1/4/00

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent



Signature/Registered Agent

1/4/00

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA