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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
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TRANSMITTAL LETTER

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

SUBJECT: (PROPOSED CORPORATE	GIE COP. NAME – MUST INCLUDI	E SUFFIX)
Enclosed is an original and one(1) copy of the artic \$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL CO	PY REQUIRED

3213 Whirlqway To Address

Tallahasspe FL 3230 9

City, State & Zip

Baytime Telephone number

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

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The name of t	NAME he corporation shal	l be:		 • • • •			•	
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