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TRANSMITTAL LETTER

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

SUBJECT:	OWANK W.C.U. (PROPOSED CORPORA)	E NAME - MUST INCLU	DE SUFFIX)		
Enclosed are an original	and one (1) copy of the artic	les of incorporation and	a check for:	-	
Filing Fee F	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	Melody C,	Swank Printed or typed)			
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	Bradenton	## 3420 State & Zip	29	6- NNF 70	SECTO TO A
	941 – 746. Daytime Te	elephone number		PH 1:42	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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