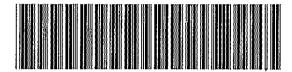
## P05000029351

(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



800047010688

02/28/05--01001--009 \*\*70.00

05 FEB 25 PM 4: 27

05 FEB 25 PM 4: 22



## TRANSMITTAL LETTER

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

SUBJECT: CRUMP'S LZWN (PROPOSED CORPORA)	Cars In	<u>_</u>
(PROPOSED CORPORA)  Enclosed are an original and one (1) copy of the articles.		
\$70.00 \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: DAL Crange	ADDITIONAL CO	PPY REQUIRED

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

(SSO) 552 - 50 48
Daytime Telephone number

4		
articles of incorporation  a compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		Dic I
RTICLE I NAME		100 F
The name of the corporation shall be:		
Crump's hour Care Inc	·	25 PII
ARTICLE II PRINCIPAL OFFICE		PII 4: 2: F. F. GRAI
The principal place of business/mailing address is:  Po Rox 180707		27 ATE RIDA
Tell, 71 323/8	-	
ARTÍCLE III PURPOSE		
The purpose for which the corporation is organized is:		
Lawn Carc		
ARTICLE IV SHARES The number of shares of stock is:	-	,
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	<del></del> .	
(P) DAIE Crump For 3535 Roberts AUE Lotus		
Tall, H 32310		
ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Box NOT acceptable) of the	registered age	nt is:
PAIS Crump 50 3535 Kuberls AUE Lot 48	-	
3535 Kuberts AUE 20148		
ARTICLE VII INCORPORATOR	•	
The <u>name and address</u> of the Incorporator is:		
DALE Crump 3r 3535 Roberts AUE Lot 48		
3535 Roberts AUR Lot 18		
*****************	د د د د د د د د د د د د د د د د د د د	ر الرواز
Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree	d corporation at	the place designated in this
Signature/Registered Agent	. 4/2	Date
	- 1	Date Strong
Poly Signature/Incorporator	2/2	5 <u>/ z かり 5</u> Date