

P05000041754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

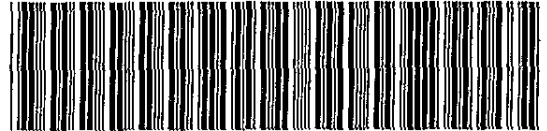
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3/21/05  
BWK

## TRANSMITTAL LETTER

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

SUBJECT: CROWN BUILDING MANAGEMENT OF  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)  
FLORIDA CO.

Enclosed are 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: MARILU GAGNER  
Name (Printed or typed)

2634 PIERCE ST.  
Address

HOLLYWOOD, FL 33020  
City, State & Zip

(954) 614-8977  
Daytime Telephone number

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

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F. S. (Profit)

### ARTICLE I NAME

The name of the corporation shall be: Crown Building Management of Florida Co.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 2634 Pierce St. Hollywood,  
Florida, 33020

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Management

### ARTICLE IV SHARES

The number of shares of stock is: 1,000 Common Shares

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

**Marilu Gagner President**

2634 Pierce St. Hollywood, Fl. 33020

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

**Marilu Gagner**

2634 Pierce St.

Hollywood, Florida 33020

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

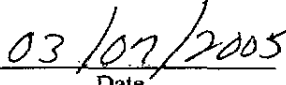
**Marilu Gagner**

2634 Pierce St. Hollywood, Florida 33020

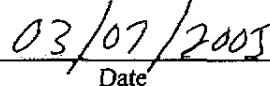
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
Signature/Registered Agent

  
Date

  
Signature/Incorporator

  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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