P05000073563

(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:				





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05/04/05--01023--001 **70.00



TRANSMITTAL LETTER

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

SUBJECT:	CRANSTON INCORPORATED			
	(PROPOSED CORPORA)			
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REOUIRED	
FROM:	ROBERT CRANSTON Name (Printed or typed)			
Name (Printed or typed)				
P.O. BOX 555027				
•	A	Address		
	ORLANDO, FL 32855-5027			
•	City, State & Zip			
•		17-522-5067		

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

05 MAY 18 /M 9:55

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May 6, 2005

ROBERT CRANSTON P.O. BOX 555027 ORLANDO, FL 32855-5027

SUBJECT: CRANSTON INCORPORATED

Ref. Number: W05000023175

We have received your document for CRANSTON INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6965.

Dorine Martin Document Specialist New Filings Section

Letter Number: 805A00032799

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:

CRANSTON INCORPORATED

FILED

05 MAY 18 AM 9: 05

SECRETARY OF STATE TALLAMASSET FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
P.O. BOX 555027 2804 Ploueer Rd #3 ORLANDO, FL 32855-5027- 32808

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CARPENTRY AND CONCRETE

ARTICLE IV SHARES

The number of shares of stock is: 1000

INITIAL OFFICERS AND/OR DIRECTORS

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

ROBERT CRANSTON, PRESIDENT P.O. BOX 555027 2804 ROBER Rd. #3 ORLANDO, FL-32855-5027

ARTICLE VI REGISTERED AGENT

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

ROBERT CRANSTON 2804 Pinneer Rd #3 OLLando Fl. 32808

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT CRANSTON, P.O. BOX 555027 2804 PIONERE Rd. #3 ORLANDO, FL 32855-5027 32808

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

Signature/Registered Agent

CRAY Ston

Z-1-05 Date