

P06000073570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

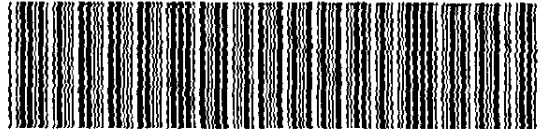
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800075359928

05/26/06--01010--021 **37.50

FILED
06 MAY 26 PM 4:14
TALLAHASSEE, FLORIDA

5/26
SP

COVER LETTER

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

SUBJECT: Craft Corp.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Amber Nicole Craft

Name (Printed or typed)

PO Box 494134

Address

Port Charlotte, FL 33949-4134

City, State & Zip

561-236-0200

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:

Craft Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

POB 494134

Port Charlotte, Fl 33949-4134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all legal businesses permissible under the Laws of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

50000 at \$0.01

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CEO Amber Nicole Craft

ARTICLE VI REGISTERED AGENT

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

Amber Nicole Craft

1313 Leawood Rd

Englewood, Fl 34223

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Amber Nicole Craft

POB 494134

Port Charlotte, Fl 3249-4134

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

Amber N. Craft
Signature/Registered Agent

Amber N. Craft
Signature/Incorporator

May 23, 2006
Date
May 23, 2006
Date

FILED
06 MAY 26 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA