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SECRETARY OF STATES

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COVER LETTER

TO: Division of Corporations
SUBJECT: B Crawfords Painting Corporation
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
WILLIAM CRAWFORD
(Name of Person) B Crawfords Parnfing Corporation (Name of Firm/Company) 4696 N.HIDDEN OAKS WAY
(Address)
CRYSTAL RIVER FL. 34428
(City/State and Zip Code)
For further information concerning this matter, please call:
WILLIAM CRAWFORD at (352) 563-2844
WILLIAM CRAWFORD at (352 563-2844 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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A DELCT ES OF DISCORDOR ATION	TEL 4357.
ARTICLES OF INCORPORATION To compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	01-4/35/
recompliance with Chapter 607 and/of Chapter 621, F.S. (Front)	26
ARTICLE I NAME	,
The name of the corporation shall be:	
B. Crawfords Painting Con	Pomton
ARTICLE II PRINCIPAL UNICE	
The principal street address and mailing address, if different is: 4696 N. H. daen Daks Way Crystal River, Fl. 34428	
Prystal River Fl 3442/8	THE PART TO THE PA
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	TO TO
PAINTING	ri
ADMICE THE CITATION	
ARTICLE IV SHARES The number of shares of stock is:	<u> </u>
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO List name(s), address(es) and specific title(s):	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO List name(s), address(es) and specific title(s): ITLE PD WILLIAM CRAWFORD 4696 N. HIDDEN OAKS WAY CRYSTA ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable)	AL RIVER FL. 34428 of the registered agent is:
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