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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

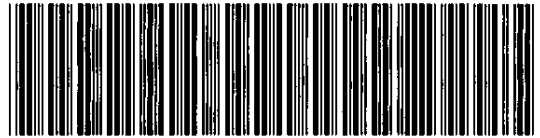
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ep 12/10/09

COVER LETTER

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

SUBJECT: CROWLEY'S RESTAURANT, INC.

(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: DENNIS CROWLEY

Name (Printed or typed)

255 Ninth Avenue Northeast

Address

St. Petersburg, Florida 33701

City, State & Zip

727-385-7509

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

The undersigned, acting as Incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

1. NAME: The name of the corporation is **CROWLEY'S RESTAURANT**
INC.
2. DURATION: The period of its duration is perpetual.
3. PURPOSE: The purpose is to engage in the business of operating restaurant and any other activity or business permitted under the laws of the United States and the State of Florida.
4. CAPITAL STOCK: The corporation is authorized to issue 7,500 shares, all of one class, at One (\$1.00) Dollar par value.
5. INITIAL REGISTERED OFFICE AND AGENT: The name and address of the initial registered office and agent of this corporation is as follows:

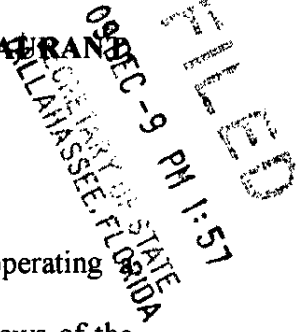
WATSON R. SINDEN, ESQUIRE

360 Central Avenue, Suite 1270

St. Petersburg, Florida 33701
6. INITIAL PRINCIPAL OFFICE OF CORPORATION: The initial principal office of this corporation is as follows:

269 Central Avenue

St. Petersburg, Florida 33701
7. INITIAL BOARD OF OFFICERS: This corporation shall have one (1) officer, to wit: DENNIS C. CROWLEY, President and Secretary. The number of



officers may be either increased or decreased from time to time by an amendment of the bylaws of the corporation in the manner provided by law.

8. INITIAL BOARD OF DIRECTORS: This corporation shall have no initial directors. The number of directors may be either increased or decreased from time to time by an amendment of the bylaws of the corporation in the manner provided by law.

9. INCORPORATOR: The name and address of the Incorporator signing these Articles of Incorporation is:

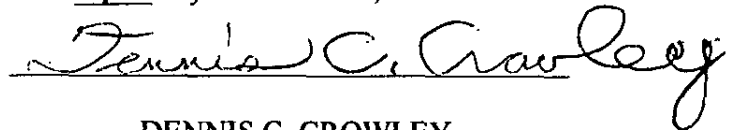
DENNIS C. CROWLEY

255 Ninth Avenue Northeast

St. Petersburg, Florida 33701

10. AMENDMENT OF ARTICLES: This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned Incorporator and Registered Agent have executed these Articles of Incorporation this 4th day of December, 2009.



DENNIS C. CROWLEY

STATE OF FLORIDA

COUNTY OF PINELLAS

BEFORE ME, the undersigned authority, this day personally appeared, DENNIS C. CROWLEY, who is personally known to me or who has produced _____ as identification and who executed the foregoing Articles of

Incorporation and he acknowledged to and before me that he executed said instrument for the purposes therein expressed.

SUBSCRIBED AND SWORN to before me this 4th day of December, 2009.



PAMELA S. SMALL
MY COMMISSION # DD 694539
EXPIRES: August 8, 2011
Bonded Thru Budget Notary Services

NOTARY PUBLIC
State of Florida at Large:

Pamela S. Small

Pamela S. Small
Printed Name

My Commission Expires:

I HEREBY STATE that I am familiar with and accept the duties and responsibilities as Registered Agent for this said corporation.

[Signature]
WATSON R. SINDEN, Registered Agent

STATE OF FLORIDA
COUNTY OF PINELLAS

BEFORE ME, the undersigned authority, this day personally appeared, WATSON R. SINDEN, who is personally known to me or who has produced as identification and who executed the foregoing Articles of Incorporation and he acknowledged to and before me that he executed said instrument for the purposes therein expressed.

SUBSCRIBED AND SWORN to before me this 4th day of December, 2009.



PAMELA S. SMALL
MY COMMISSION # DD 694539
EXPIRES: August 8, 2011
Bonded Thru Budget Notary Services

NOTARY PUBLIC
State of Florida at Large:

Pamela S. Small

Pamela S. Small
Printed Name

My Commission Expires:

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TALLAHASSEE, FLORIDA
STATE OF FLORIDA