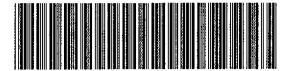
## P12000029329

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SECRETARY OF STATE FALLAMASSEE, FLORIDA

MRD 1/12

## **COVER LETTER**

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

SUBJECT: C.R. Sweets Inc.	·			
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )				
Enclosed are an original and one (1) copy of the arti	cles of incorporation ar	nd a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL C	OPY REQUIRED		
FROM: Crystal Robinson	e (Printed or typed)	ARU MART		
1907 Marasco Lane	Address			
North Port, FL 34286 City,	State & Zip			
941-769-1124 Daytime T	elephone number			
<u>crsweetsforyou@gmail.com</u> E-mail address: (to be used for future annual report notification)				

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





## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 9, 2012

CRYSTAL ROBINSON 1907 MARASCO LANE NORTH PORT, FL 34286

SUBJECT: C. R. SWEETS INC. Ref. Number: W12000013739

We have received your document for C. R. SWEETS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected 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) 245-6052.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 912A00008970



## ARTICLES OF INCORPORATION

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

ARTICLE I The name of the co	NAME C.R. Sweets Inc.			
ARTICLE II	PRINCIPAL OFFICE			
	Principal street address		Mailing address, if different is:	
•	1907 Marasco Lane		,	
	North Port, FL 34286		•	
<del>-</del>				
	·			
ARTICLE III				
	which the corporation is organized is:		<i>&gt;</i> .	
Specialty bal	SHARES		TALLED ON W. O'S TALE SECRETARY OF STALE	
The number of sha	res of stock is:100			
APTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	2 <b>9</b>		
	itle: Crystal Robinson, President		@):	
Address:	1907 Marasco Lane		1907 Marasco Lane	
riddiess.	North Port, FL 34286		North Port, FL 34286	
	THURST COLL SPZUU	<del></del>	HUBUL MILL L WIZOW	
Name and T	itle:Crystal Robinson, Secretary	— Name and Titl	le:Alexander Robinson, Treasurer	
Address:	1907 Marasco Lane	Address:	1907 Marasco Lane	
	North Port, FL 34286		North Port, FL 34286	
Name and T Address:	itle:		le:	
ARTICLE VI	REGISTERED AGENT			
	Prida street address (P.O. Box NOT acceptable) of Crystal Robins OV 1907 Marasco Lave	f the registered ag  	gent is:	
ARTICLE VII	INCORPORATOR			
	dress of the Incorporator is:			
Name:	Crystal Robinson			
Address:	1907 Marasco Lane			
	North Port, FL 34286			
	ned as registered agent to accept service of process m familiar with and accept the appointment as reg  Required Signature/Registered Agent			
I submit this do-	mont and affirm that the fasts stated bands and	a toura I man more	es that the false information submitted in a	
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.				
document to the I	100 Kolvinso	w us provided for	03/05/2012	
U	Required Signature/Incorporator		Date	