

P/4000080498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

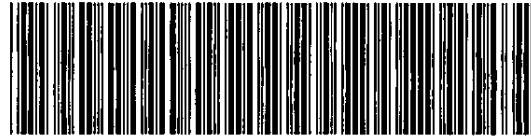
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 10/01/14

COVER LETTER

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

SUBJECT: _____

CREATIVE CRYSTAL Co

(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: _____

LUCIA REID

Name (Printed or typed)

73 S. PALM AVE

Address

Suite 222

City, State & Zip

SARASOTA, FL 34236

Daytime Telephone number

CRYSTAL@CREATIVECRYSTAL.COM

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

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

ARTICLE I NAME

The name of the corporation shall be: CREATIVE CRYSTAL CO.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

73 S. PALM AVE
Suite 222
Sarasota, FL 34236

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: internet site

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LUCIA REID, Pres Name and Title: _____

Address: 73 S Palm Ave #222 Address: _____

Sarasota, FL 34236

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TALLAHASSEE, FLORIDA

(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Lucia Reid
Address: 735 Palm Ave #222
Sarasota, FL 34236

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lucia Reid
Address: 735 Palm Ave #222
SARASOTA, FL 34236

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TALLAHASSEE, FLORIDA

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

Lucia Reid

Required Signature/Registered Agent

9/25/14
Date

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.

Lucia Reid

Required Signature/Incorporator

9/25/14
Date