P16000088808

(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				



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Office Use Only

W16-070581

~ 11/07/16



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 17, 2016

ANDRE SELBACH 4934 BEACON HILL DR. NEW PORT RICHEY, FL 34652

SUBJECT: CRAFTED CREATIONS CO.

Ref. Number: W16000070581

We have received your document for CRAFTED CREATIONS CO. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The document must contain a registered agent with a Florida street address and a signed 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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 116A00022216

COVER LETTER

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

SUBJECT: Cratted (rea	tions Co	
(PROPOSED CORPORA)	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	d 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
previous	ADDITIONAL CO	DPY REQUIRED
FROM: Andre Selbach Name	(Printed or typed)	·
4934 Beacon	Hill Dr.	
New Port Richey	FL 34652	<u> </u>
(727) 858 - 9 Daytime To	7053 Elephone number	

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

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

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

ARTICLE I NAME The name of the corporate	ion shall be: <u>Crafted</u>	Creations Co.	
•	IPAL OFFICE Principal street address	Mailing add	ress, if different is:
13625 50	JH Way N. #17 S, FL 33760		
ARTICLE III PURPO			
Any ar	nd all Lawful	busines.	
			3 VIS 3 VIS 2911
			SEURL PREVIOUS OF A PROPERTY O
ARTICLE IV SHARI	Ec.		PH 2:
The number of shares of	stock is: OO	 	<u>5</u>
	:: Andre Selbach-Pres		
Address	4934 Beacon Hill New Port Riches, Fr		
	34	60	
Name and Title:	:	Name and Title:	
Address			
	:		
Address			

Name and Title:	Name and Title:
Address	Address:
	-
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of	f the registered agent is:
Name: Andre Selbach	-
Address: 4934 Beacon Hill D	C .
New Port Riche FL	01 VI 29
340	
ARTICLE VII INCORPORATOR	ON CORE IN COR
The <u>name and address</u> of the Incorporator is:	F 185
Name: Andre Selbach	면 되었다.
Address: 4934 Beacon Hill	$\mathcal{D}_{\mathbf{r}}$. $\overset{2}{=}$
New Port Richard	2
1000 100 100 005,	34452
ARTICLE VIII _ EFFECTIVE DATE:	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and canno	
days after the filing.)	t be more than tive business days prior or 70 business
Note: If the date inserted in this block does not meet the applicable	statutory filing requirements, this date will not be listed as
the document's effective date on the Department of State's records.	
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 ond accept the appointment as reg	
AN SUNZ	11/1/16
Required Signature/Registered Agent	/ _/ _{Date}
I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree felon	
accument to the Departmentor State consultates a gira degree Jeton	y us provided for at 3.017.133, 1.3.
Required Signatute/Incorporator	