

P22000026057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

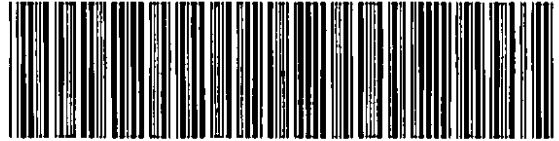
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900383257359

04/15/22--0 113--0.01 4*28.75

FILED

22 MAR 15 AM 7:17

SECRETARY OF STATE
FALLASSEE, FLORIDA

S. CHATHAM

APR - 6 2022

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

March 11, 2022

To Whom It May Concern:

REF: DREW CREW FOR YOU, INC.

My name is William Drew , I am the President of DREW CREW FOR YOU INC.

At this time, I don't want to reinstate this company.

Please open the company again using the same name.

Thank you in advance.

A handwritten signature in black ink that reads "William Drew". The signature is fluid and cursive, with a long horizontal line extending from the end of the name.

William Drew
DREW CREW FOR YOU INC
President

FILED
22 MAR 15 AM 7:17
SECRETARY OF STATE
TALLAHASSEE, FL 32314

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

ARTICLE I NAME Drew Crew For You, Inc.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address
1261 Meadowlark Avenue

Miami Springs, FL 33166

Mailing address, if different is:

1261 Meadowlark Avenue

Miami Springs, FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business

ARTICLE IV SHARES 1000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Drew - P

Address: 1261 Meadowlark Avenue

Miami Springs, FL 33166

Name and Title: Ana Drew - VP

Address: 1261 Meadowlark Avenue

Miami Springs, FL 33166

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
22 MAR 15 AM 7:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: William Drew - P
Address: 1261 Meadowlark Avenue
Miami Springs, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William Drew - P
Address: 1261 Meadowlark Avenue
Miami Springs, FL 33166

FILED
22 MAR 15 AM 7:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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 and accept the appointment as registered agent and agree to act in this capacity

William Drew 3-11-22
Required Signature/Registered Agent 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.

William Drew 3-11-22
Required Signature/Incorporator Date