

FILED
Mar 29, 2002 8:00 am
Secretary of State
03-29-2002 91432 045 ***150.00

1. Entity Name
OPTI-SAFE MASK COMPANY

P.O. BOX 37247
TALLAHASSEE FL 32315

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

Zip Code

DATE _____

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

Daytime Phone #

CR2E034 (9/01)