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ORIGINAL ORIGINAL

CK 3638
$100.00
MC

1. Name of company or name of individual (not fictitious name or d/b/a): Kim's Grocery & Seafood

2. Name under which applicant will do business (fictitious name, etc.): Kim's Grocery & Seafood

3. Official mailing address:

Street: 1590 Blountstown Street

P.O. Box:

City: Tallahassee

State: Florida **Zip:** 32304

4. Florida address:

Street: 1590 Blountstown Street

P.O. Box:

City: Tallahassee

State: Florida **Zip:** 32304

5. Structure of organization:

(✓) Individual

( ) Corporation

( ) General Partnership

( ) Limited Partnership

( ) Other:

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6. **If incorporated in Florida**, provide proof of authority to operate in Florida:

Florida Secretary of State Corporate Registration Number:

Form PSC/CMU-32 (02/99)
Required by Commission Rule Nos. 25-24.510 & 25-24.511
File Name: cmu-32.doc

DOCUMENT NUMBER-DATE
01422 FEB 12 03
FPSC-COMMISSION CLERK