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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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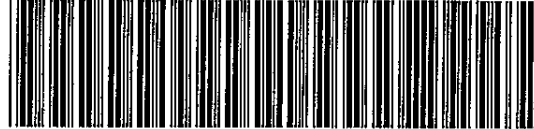
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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1-29-04
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TRANSMITTAL LETTER

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

SUBJECT: WEST COAST FINANCIAL MANAGEMENT, INC
(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: CAROL OKULA
Name (Printed or typed)

12513 SPRING HILL DRIVE
Address

SPRING HILL, FL 34609
City, State & Zip

352-684-6840
Daytime Telephone number

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:

WEST COAST FINANCIAL MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12513 SPRING HILL DRIVE
SPRING HILL, FL 34609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE INVESTMENT
AND INSURANCE SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

TEN

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

CAROL A. OKULA VICE-PRESIDENT & TREASURER
4309 BLUEWATER AVE., SPRING HILL, FL 34606
MICHAEL T. LOVELOCK-PRESIDENT & SECRETARY
1114 BENTLEY AVE., SPRING HILL, FL 34608

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

CAROL A. OKULA
12513 SPRING HILL DRIVE
SPRING HILL, FL 34609

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL T. LOVELOCK
12513 SPRING HILL DRIVE
SPRING HILL, FL 34609

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

Carol A Okula

Signature/Registered Agent

1/15/04

Date

Michael T. Lovelock

Signature/Incorporator

1/15/04

Date

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