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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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5/12/05 W05-22296

TRANSMITTAL LETTER

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

SUBJECT: Costal	Home Inspection Services (PROPOSED CORPORA)	TE NAME – MUST INCL	UDE SUFFEX)
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	l a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM: Wi	ll H. Stephens Jr.		
	Name (Printed or typed)	
	5870 Mustang Circle		
	A	ddress	
	Port Saint Lucie, Florida, 34987 Čity, S	State & Zip	
	772-468-6513	lephone number	

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 3, 2005

WILL H. STEPHENS JR. 5870 MUSTANG CIR. PORT ST. LUCIE, FL 34987

SUBJECT: COSTAL HOME INSPECTION SERVICES

Ref. Number: W05000022296

We have received your document for COSTAL HOME INSPECTION SERVICES and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the 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) 245-6840.

Bruce W Kitchens Document Specialist New Filings Section

Letter Number: 905A00031465

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:

Costal Home Inspection Services Incorporated

OSMAY I AM 8: 08 TALLAMASSTE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 5870 Mustang Cicle
Port Saint Lucie, FI 34987

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Home inspection Services and other related services

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Will H. Stephens Jr. 5870 Mustang Circle Port Saint Lucie, Fl. 34987

President/ secretary Treasure

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Will H. Stephens Jr. 5870 Mustang Circle Port Saint Lucle, FI 34987

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Will H. Stephens Jr. 5870 Mustang Circle Port Saint Lucie FI 34987

Having been named as registered agent to accept service of process for the above stated corporation at the place designated i	in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	

Will 74 Shephers (Signature/Registered Agent	5-9-05
Signature/Registered Agent	Date
Will H Skoher L	5-9-05
Signature/incorporator	Date