

P120000052705

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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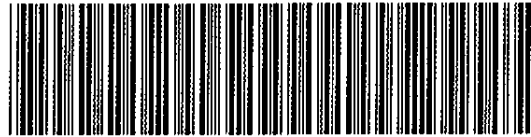
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUN 12 2012
12 JUN -7 AM 7:57
DIVISION OF CORPORATIONS

6/11

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COVER LETTER

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

SUBJECT: Crew Coast Outfitters, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Jonathan Palma, Esq.

Name (Printed or typed)

5510 Roosevelt Boulevard

Address

Clearwater, Florida 33760

City, State & Zip

(727)669-3909

Daytime Telephone number

jmpalma@palmalawgroup.com

E-mail address: (to be used for future annual report notification)

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: Crew Coast Outfitters, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
212 Shore Drive
Palm Harbor, Florida 34683

Mailing address, if different is:
P.O. Box 436
Ozona, Florida 34660

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Outdoor marine environment clothing line.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christian Troy Jone, President	Name and Title: _____
Address: 212 Shore Drive	Address: _____
Palm Harbor, Florida 34683	_____

Name and Title: Jonathan Michael Palma, Vice Pres.	Name and Title: _____
Address: 5510 Roosevelt Boulevard	Address: _____
Clearwater, Florida 33760	_____

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:

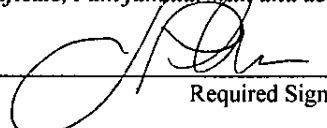
Name: Jonathan M. Palma
Address: 5510 Roosevelt Boulevard
Clearwater, Florida 33760

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jonathan M. Palma
Address: 5510 Roosevelt Boulevard
Clearwater, Florida 33760

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



Required Signature/Registered Agent

6/4/2012

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.



Required Signature/Incorporator

6/4/2012

Date

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