Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LICENSES ETC INC Account Number : I20070000159

Phone : (239)777-1028

Fax Number : (877)275-3593

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:_	Support@licensesetc.com
	_	

FOREIGN PROFIT/NONPROFIT CORPORATION COASTAL CONSTRUCTION INC

RECEIVED MAR 0 8 2019

Certificate of Status	1
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Page Count	06
Estimated Charge	\$87.50

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Help

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- There is a \$70.00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are optional. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and check. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report
 All Profit Corporations must file an Annual Report yearly to maintain "active"
 status. The first report is due in the year following formation. The report must be filed
 electronically online between January 1st and May 1st. The fee for the annual report is
 \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual
 Report Reminder Notices" are sent to the e-mail address you provide us when you submit
 this document for filing. To file any time after January 1st, go to our website at
 www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051 or writing the Registration Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.

CR2E007 (6/15)

COVER LETTER

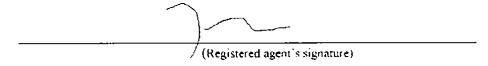
то:	Registration Section Division of Corporations				
ČIID I	COASTAL CONSTRUCT	ION INC			
SUBJ		e of corporation	- must include suffix		
Dear S	ir or Madam:				
"Certi	iclosed "Application by Foreign Officate of Existence," or "Certificate referenced foreign corporation to	te of Good Stan	ding" and check are sub		
	return all correspondence concer Y BLOSSER	ning this matter	to the following:		
		Name of	Person		
LICEN	ISES ETC INC.				
886 11	OTH AVE N., SUITE #6	Finn/Com	pany		
		Addro	ess		
NAPL	ES, FL 34108				
		City/State a	nd Zip code		
SUPP	ORT@LICENSESETC.COM		<u> </u>		
	E-mail addre	ss: (to be used :	for future annual report	notification)	
For fu	rther information concerning this	matter, please o	eall:		
MOLI	Y BLOSSER	239	777-1028		
	Name of Person	at (Area Cod	c Daytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301			MAILING A Registration S Division of Co P.O. Box 632 Tallahassec, F	ection orporations 7	
Enclos	sed is a check for the following ar	nount:			
□ \$7	0.00 Filing Fee	ing Fee & C c of Status	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. COASTAL CONSTRUCTION INC l. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") CCLCOASTAL CONSTRUCTION INC. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated) (FEI number, if applicable) 12/14/2018 (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1901 NEWPORT BLVD., SUITE 350 COSTA MESA, CA 92627 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) LICENSES ETC., INC. Name: 886 110TH AVE N. SUITE #6 Office Address: NAPLES

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIREC	CTORS			
Chairman: _				
Address:				
Vice Chairm	an:			
Director:				
		,,_,		
Address:				
Address:				
B. OFFIC	DEBORAH L. POLICICCHIO			
	901 NEWPOERT BLVD., SUITE 350			
Address:	OSTA MESA, CA 92627	رن خ	2019	
Vice Preside	ent:	11.1.	HAR	77
		10 T	8	- Cerise
		S :	7	
Secretary:		m €	9: 1	
			56	
	necessary, you may attach an addendum to the application listing additional officers a	nd/or dir	ectors	
12.	Signature of Director or Officer			
The officer are true and a third degr	or director signing this document (and who is listed in number 11 above) affirms that d that he or she is aware that false information submitted in a document to the Departner felony as provided for in s.817.155, F.S.	the facts	stated	herein
13 DEBO	RAILE, POLICICCHIO, P			

(Typed or printed name and capacity of person signing application)

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STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Coastal Construction Inc is a Profit Corporation

formed or qualified under the laws of Wyoming did on December 13, 2018 with a delayed effective date of December 14, 2018, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2018-000832596.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 7th day of March, 2019 at 1:49 PM. This certificate is assigned 030182222.



Solver X. Bulm Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.