

F1600003469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

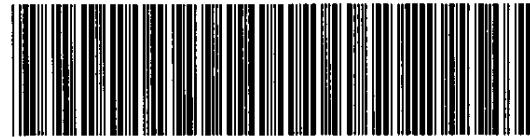
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/01/16--01016--001 **78.75

ALL INFORMATION IS UNCLASSIFIED
EXCEPT AS NOTED

16 AUG - 1 PM 12:07

AUG 04 2016

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations
Coast To Coast Services, INC

SUBJECT: _____ Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:
Scott Ditto

Name of Person	
Coast To Coast Services. INC	
Firm/Company	
4453 Topsail Trail	
Address	
New Port Richey, Florida 34652	
City/State and Zip code	
scott.d@cst2csts.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Scott Ditto 727 858-0691
at () _____
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 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.

Coast To Coast services. INC

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp.")

Coast To Coast Facilities Compnay

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Wyoming

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
Feburary 24, 2016

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
No business conducted to date

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
4453 Topsail Trail, New Port Richey, FL 34652

7. _____
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Scott Ditto

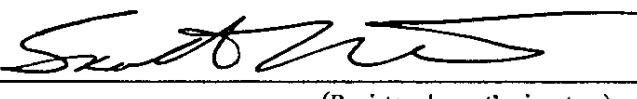
Name: _____
4453 Topsail Trail

Office Address: _____
New Port Richey 34652
(City) _____, Florida _____
(Zip code)

16 AUG - 1 PM 2:07
TALLAHASSEE, FLORIDA
RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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.



(Registered agent's signature)

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. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

Scott Ditto

President: _____

4453 Topsail Trail

Address: _____

New Port Richey, FL 34652

16 AUG - 1 PM '07
TALLAHASSEE, FLORIDA

Teri Ditto

Vice President: _____

4453 Topsail Trail

Address: _____

New Port Richey, FL 34652

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Scott Ditto

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

Scott Ditto, President

13. _____

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

STATE OF WYOMING
Office of the Secretary of State

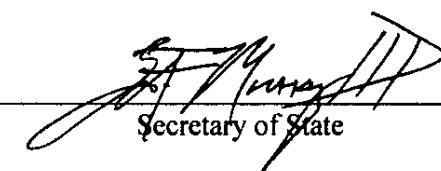
I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Coast to Coast Services. INC
is a
Profit Corporation

formed or qualified under the laws of Wyoming did on **February 24, 2016**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2016-000707377**.

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 28th day of July, 2016 at 2:26 PM. This certificate is assigned 020689731.



Secretary of State

**STATE OF WYOMING • SECRETARY OF STATE
ED MURRAY
BUSINESS DIVISION**

2020 Carey Avenue, Cheyenne, WY 82002-0020

Phone 307-777-7311 • Fax 307-777-5339

Website: <http://soswy.state.wy.us> • Email: business@wyo.gov

**Validation of Certificate of Good Standing for
Certificate Issued 07/28/2016**

Validation Certificate Generated: July 28, 2016

Certificate number 020689933 is a valid number for a certificate of good standing issued by the Wyoming Secretary of State's office for **Coast to Coast Services, INC**, a Profit Corporation formed or qualified under the laws of Wyoming on **02/24/2016**.