N15029000304

(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 Oray



100267502981

12/22/14--01029--023 **78.75

SEPRITABLE D PH 4: 02

W14-76150

COVER LETTER

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

SUBJECT: Florida Coastal Life Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM:	Vince Bruner					
	Name (Printed or typed)					
	110 Eglin Pkwy SE					
	Address					
	Fort Walton Beach FL 32548					
	City, State & Zip					
	850-243-4227					
	Daytime Telephone number					

vince@brunerfirm.com

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

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



RECEIVED

15 JAN -9 AM 10: 05

FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE Division of Corporations

December 24, 2014

VINCE BRUNER 110 EGLIN PKWY SE FORT WALTON BEACH, FL 32548

SUBJECT: FLORIDA COASTAL LIFE INC.

Ref. Number: W14000076150

We have received your document for FLORIDA COASTAL LIFE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Please return 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) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 014A00027180

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

The name of the	corporation shall be: Florida Coas	tal Life Inc			
ARTICLE II	PRINCIPAL OFFICE				
110	Principal <u>street</u> address: 110 Eglin Pkwy SE		Mailing address, if different is:		
For	t Walton Beach FL				
	r which the corporation is organized is:		Fort Walton Beach Florida and then nior citizens in this city. Net revenues		
			Fort Walton Inc., when the project is		
complete) .				
	T				
	· · · · · · · · · · · · · · · · · · ·				
The manne	"				
The manne	er of election of directors is as sta	ated in the by	ylaws.		
ARTICLE V	INITIAL OFFICERS AND/OR DI	RECTORS			
Name and Title	Vince Bruner-Pres.	Name and Title	Vince Bruner-Sec.		
Address	110 Eglin Pkwy SE	Address:	110 Eglin Pkwy SE		
73441035	Fort Walton Beach FL 32548	11461055	Fort Walton Beach		
Name and Title	:	Name and Title:	To R M		
Address			F SIME		
71001033		, / Iddioss.	O.E. M		
Name and Title	:	Name and Title:			
Address					
		,			

Name and Title:	1	Name and Title:			
Address _		Address:			
-					
-	a surpairage	·····			
Name and Title:		Name and Title:			
Address _		Address:			
_	27.22				
_					
ARTICLE VI	REGISTERED AGENT				
	orida street address (P.O. Box NOT accept	able) of the registered agent is:			
Name:	Vince Bruner				
Address:	110 Eglin Pkwy SE				
	Fort Walton Beach FL				
ARTICLE VII	INCORPORATOR Idress of the Incorporator is:				
	Vince Bruner				
Name:	110 Eglin Pkwy SE				
Address:	Fort Walton Beach FL 32	 05/18			
	7 OIT WAILON DEACH PL 32				
	ned as registered agent to accept service of familiar with and accept the appointment as			nated in th	ıis
	mal Gine		12/17/14		
	Required Signature of Registered A	gent	Date		
I submit this doci to the Departmen	iment and affirm that the facts stated herein t of State constitutes a mird degree felony as	a are true. I am aware that any false info s provided for in s.817.155, F.S.	ormation submitted in	n a docume	nt
	mud han		12/17/14	3	•
	Required Signature of Incorpo	Tator	Date	JAN	? 7
	()		ASS.	9-1	=
			E C	35 [П
			FLO FLO	= C	
			RIO	±: 0%	
			<i>p</i>	-	