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TRANSMITTAL LETTER

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*****87.50 *****87.50

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

SUBJECT: Coastal Marine USA, Inc.
(Proposed corporate name - must include suffix)

FILED
00 FEB -7 AM 7:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Darryl J. Parry
Name (Printed or typed)

12140 SW 202 Street #3221
Address

Miami, Florida 33177
City, State & Zip

305-378-6126
Daytime Telephone number

F. CHESLER FEB 1 4 2000

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Coastal Marine USA, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Coastal Marine USA, Inc.
12140 SW 202street #3221
Miami, Florida 33177

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS


The name and Florida street address of the initial registered agent are:

Kathleen M. Rauch
12140 SW 202 Street #3221
Miami, Florida 33177

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Darryl J. Parry
12140 SW 202 Street #3221
Miami, Florida 33177



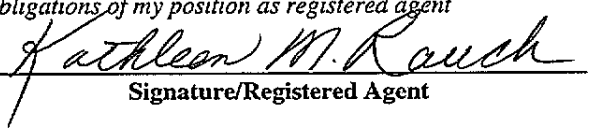
Signature/Incorporator



Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent



Signature/Registered Agent



Date

FILED
00 FEB -7 AM 7:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA