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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : GERALD S. LESHER

Account Number: I19990000219

Phone : (561) 471-7155 : (561)471-8055 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

COASTAL MUTUAL INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$70.00 |

[[[H000000148221]]]

ARTICLES OF INCORPORATION

OF

COASTAL MUTUAL INC.

THE UNDERSIGNED, acting as incorporator of a Corporation under the Florida Business

Corporation Act, adopts the following Articles of Incorporation for such Corporation:

ARTICLE I - NAME

The name of this Corporation is: COASTAL MUTUAL INC.

ARTICLE II - DURATION

The duration of this Corporation is perpetual.

ARTICLE III - PURPOSE

The purpose for which this Corporation is organized is to engage in any lawful act or activities for which corporations may be organized under the laws of the State of Florida.

ARTICLE IV - MAILING ADDRESS OF CORPORATION

The mailing address and principal place of business of this Corporation is: 9460 NW 17TH STREET PLANTATION FL 33322.

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ARTICLE V - STOCK

The aggregate number of shares which this Corporation shall have authority to issue is 1,000,000 shares of no par common voting stock.

ARTICLE VI - INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of this Corporation's initial registered office in Florida is 1555 Palm Beach Lakes Blvd. Ste 1510 West Palm Beach, Florida 33401, and the name of its initial registered agent at that address is GERALD S. LESHER. 1555 Palm Beach Lakes Blvd. Ste 1510 West Palm Beach, Florida 33407

ARTICLE VII - INCORPORATOR

The name and address of the incorporator is:

Name

<u>Address</u>

GERALD S. LESHER

1555 PALM BEACH LAKES BLVD WEST PALM BEACH

FL 33401

DATED this 4 day of APRIL 2000

HER, Incorporator and

Registered Agent

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| STATE OF FLORIDA |) |
|----------------------|-----|
| |)ss |
| COUNTY OF PALM BEACH |) |

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared, GERALD S.LESHER, to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this 4 day of APRIL 2000

Notary Public Salure Scimmer
Sign: Salure Scimmer

State of Florida at Large My Commission Expires:

NOTARY PUBLIC - STATE OF FLORIDA SALWA SCIARRIND COMMISSION & CC639069 EXPIRES 6227203 BONDED THRU ASA 1-888-NOTARY1

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

ACKNOWLEDGMENT:

Having been named to accept service of process for COASTAL MUTUAL INC. registered office of the Corporation in this State designated in its Articles of Incorporation, I hereby accept to act in this capacity and agree to comply with the provisions of Section 607.0505 Florida Statutes.

Date: day of APRIL, 2000

GERALD S. LESHE

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SECRETARY OF STATE.
TALLAHASSE FETABLE

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