

P01000031881

TRANSMITTAL LETTER

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

400003910904--2
-03/27/01--01007--009
*****70.00 *****70.00

SUBJECT: Shoreline Consulting, 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Jeffrey A. Altizer
Name (Printed or typed)
P.O. Box 770823
Address
Coral Springs, FL 33077
City, State & Zip
813-417-0412
Daytime Telephone number

FILED
2001 MAR 26 AM 9:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

3/29/01

ARTICLES OF INCORPORATION

NAME

The name of the corporation is: Shoreline Consulting, Inc.

FILED

2001 MAR 26 AM 9:32

SECRETARY OF STATE
TALLAHASSEE FLORIDA

PRINCIPAL OFFICE

The principal office of the corporation is: PO Box 770823, Coral Springs, FL 33077.

NUMBER OF SHARES

The number of shares the corporation is authorized to issue is 1000 shares with a par value of \$1.00 each.

INITIAL BOARD OF DIRECTORS

The incorporator shall hold an organizational meeting at the call of a majority of the incorporators to elect directors and complete the organization of the corporation, or may take such action without a meeting in writing as provided by law.

PREEMPTIVE RIGHTS

The Shareholders shall have the preemptive right to purchase unissued shares of the corporation.

INCORPORATOR

The name and address of each incorporator is: Jeffrey A Altizer, PO Box 770823, Coral Springs, FL 33077-0823.

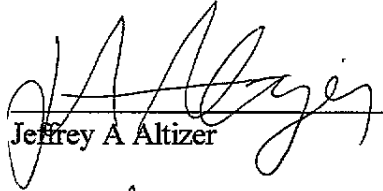
REGISTERED OFFICE AND AGENT

The street address of the corporation's initial registered agent at that office is as follows: Jeffrey A Altizer, 11477 NW 39th Ct #204, Coral Springs, FL 33065.

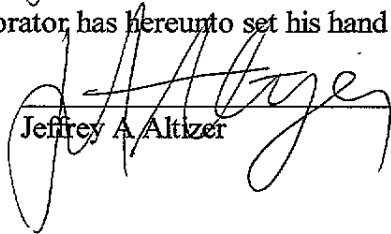
PREPARED BY:
JEFFREY A. ALTIZER
PO Box 770823
Coral Springs, FL 33077-0823
Telephone: (813) 417-0412

ACCEPTANCE

The undersigned does hereby accept his appointment as registered agent as set forth above.


Jeffrey A Altizer

IN WITNESS WHEREOF the undersigned incorporator has hereunto set his hand and seal on this 22nd day of March 2001.

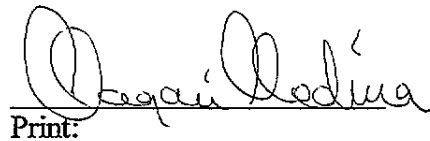

Jeffrey A Altizer

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 22nd day of March 2001, by Jeffrey A Altizer, who is personally known to me or who has produced _____ as identification.

NOTARY PUBLIC


Print:

 Magali Medina
My Commission CC779179
Expires September 29, 2002

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2001 MAR 26 AM 9:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA