

P018880091086

JAMIE L. LOPER
108 Spring Lake Trail
Hawthorne, Florida 32640

352/475-5222

Aug. 10,
~~July 2~~, 2001

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

500004529995--0
-08/13/01--01057--012
*****70.00 *****70.00

Re: Coastal Reimbursement Services, Inc.

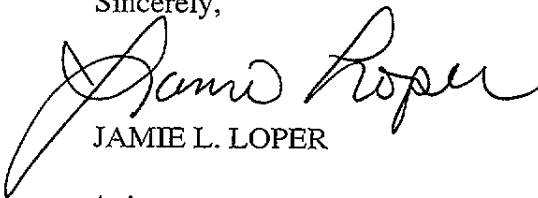
RECEIVED DATE
8-6-01

Dear Sir/Madam:

Please file the enclosed Articles of Incorporation and Designation for the above corporation. A check in the amount of \$70.00 has been enclosed for the filing and designation fees.

If you should have any questions, please call. Thank you for your assistance in this matter.

Sincerely,


JAMIE L. LOPER

/mjs
Enclosures

FILED
01 SEP 13 PM 5:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Samie L. Loper
GAVE
AUTHORIZATION BY PHONE TO
CORRECT effect date
DATE 7-17-01
DOC. EXAM WC

9-17-01
11/27
WC



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 17, 2001

JAMIE L. LOPER
108 SPRING LAKE TRAIL
HAWTHORNE, FL 32640

SUBJECT: COASTAL REIMBURSEMENT SERVICES, INC.
Ref. Number: W01000019127

We have received your document for COASTAL REIMBURSEMENT SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours. *corrected*

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the original and ~~one copy of 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) 245-6995.

Wanda Cunningham
Document Specialist
New Filing Section

Letter Number: 701A00047222

1-866-481-6245

ARTICLES OF INCORPORATION
OF
COASTAL REIMBURSEMENT SERVICES, INC.

FILED
01 SEP 13 PM 5:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article I

Name. The name of this Corporation is Coastal Reimbursement Services, Inc. and the principal office address of the corporation is 108 Spring Lake Trail, Hawthorne, FL 32640.

EFFECTIVE DATE
8-6-01

Article II

Initial Registered Office and Agent. The street address of the initial registered office of this Corporation is 131 Price Road, Melrose, Putnam County, Florida, 32666 and the name of the initial registered agent of this Corporation is MITCA J. SMITH.

Article III

Capital Stock. This Corporation is authorized to issue 100 shares of One Dollar (\$1.00) par value common stock. All shareholders shall have preemptive rights in future stock sales by the corporation.

Article IV

Duration. The period of duration of this Corporation shall be perpetual, commencing on the date of filing these articles.

Article V

Purpose. The purpose of this Corporation is to engage in any activities or businesses permitted under the laws of the United States and under the Florida Business Corporation Act.

Article VI

By-Laws. The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors and Shareholders.

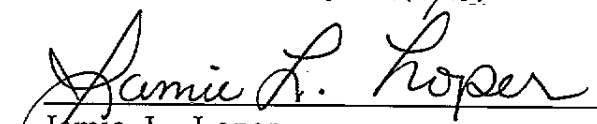
Article VII

Initial Board of Directors. The Corporation shall have one (1) Director initially. The number of Directors may either be increased or diminished from time to time by the By-Laws, but it shall never be less than one. The name and address of the initial Director of this Corporation is Jamie L. Loper, 108 Spring Lake Trail, Hawthorne, Florida 32640.

Article VIII

Incorporator. The incorporator is Jamie L. Loper, 108 Spring Lake Trail, Hawthorne, Florida 32640.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this 6th day of August 2001.



Jamie L. Loper
Incorporator

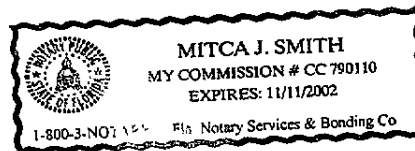
STATE OF FLORIDA
COUNTY OF PUTNAM

Before me, personally appeared Jamie L. Loper, who being first duly sworn by me deposes and say that she is the Incorporator of these Articles of Incorporation and as such Incorporator verifies that all statements and information contained herein are true and correct.

Sworn to and Subscribed to before me this 6th day of August
2001, by Jamie L. Loper, who is personally known to me.

Mitca J. Smith
Notary Public

My Commission Expires:



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

In pursuance of Chapters 48.091, 607.0501, Florida Statutes, the following is submitted, in compliance with said Acts:

First -- that **COASTAL REIMBURSEMENT SERVICES, INC.** desiring to organize under the laws of the State of Florida with its principal office as indicated in the Articles of Incorporation, at City of Keystone Heights, County of Clay, State of Florida, has named MITCA J. SMITH, 131 Price Road, Melrose, Putnam County, Florida 32666, as its agent to accept service of process within this State.

ACKNOWLEDGMENT

Having been named to accept service of process for the above-stated corporation, at the place designated in this certificate, I hereby state I am familiar with the obligations of registered agent, I accept to act in this capacity, and I agree to comply with provisions of said Act relative to keeping open said office.


MITCA J. SMITH

FILED
01 SEP 13 PM 5:14
SECRETARY OF STATE
TALLAHASSEE, FL 32392