

Charter Number Only

FD2000/030/0

VALIDATION ONLY

Judith C. Carlson

Requestor's Name

1812 NW 36th St

Oakland Park, FL 33309

City

State

ZIP

Phone

(954) 484-8792

300007982409--1  
-09/24/02--01037--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

CORPORATION(S) NAME

Coastline Painting &  
Waterproofing, Inc

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Profit         | <input type="checkbox"/> Amendment       | <input type="checkbox"/> Merger                     |
| <input type="checkbox"/> NonProfit                 | <input type="checkbox"/> Dissolution     | <input type="checkbox"/> Mark                       |
| <input type="checkbox"/> Foreign                   | <input type="checkbox"/> Annual Report   | <input type="checkbox"/> Other                      |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Reservation     | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Photo Copies    | <input type="checkbox"/> Certificate Under Seal     |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem            |
| <input type="checkbox"/> Walk In                   | <input type="checkbox"/> Will Wait       | <input checked="" type="checkbox"/> Pick Up         |
|  |  | <input type="checkbox"/> After 4:30                 |
|  |  | <input type="checkbox"/> Mail Out                   |

FILED  
02 SEP 24 PM 1:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Empire Toll Free: 1-800-432-3028

Name
Availability
Document
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Verifier
Acknowledgment
W.P. Verifier

RECEIVED  
02 SEP 24 AM 10:05

DATE SEPTEMBER 23, 2002

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FLORIDA 32314

SUBJECT: COASTLINE PAINTING & WATERPROOFING, INC.

ENCLOSED IS AN ORIGINAL AND (2) COPIES OF THE ARTICLES OF  
INCORPORATION AND A CHECK FOR \$78.75

FROM: COASTLINE PAINTING & WATERPROOFING, INC.

ARTICLES OF INCORPORATION

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

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02 SEP 24 PM 1:21  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE

ARTICLE I NAME

The name of the corporation shall be: COASTLINE PAINTING & WATERPROOFING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1718 NW 39<sup>TH</sup> STREET, OAKLAND PARK, FL 33309

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 shares of common stock, having a par value of ONE DOLLAR PER SHARE.

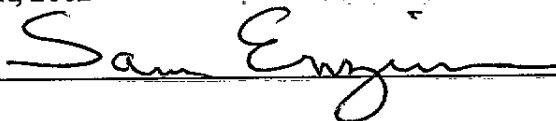
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: SAMUEL ENZINNA, 1718 NW 39<sup>TH</sup> STREET, OAKLAND PARK, FL 33309

ARTICLE V INCORPORATORS

The names and street addresses of the incorporators to these Articles of Incorporation is (are): SAMUEL ENZINNA, 1718 NW 39<sup>TH</sup> STREET, OAKLAND PARK, FL 33309

The undersigned incorporators have executed these Articles of Incorporation this 23RD day of SEPTEMBER, 2002

  
\_\_\_\_\_

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: COASTLINE PAINTING & WATERPROOFING, INC.

2. The name and address of the registered agent and office is:  
SAMUEL ENZINNA, 1718 NW 39<sup>TH</sup> STREET, OAKLAND PARK, FL 33309

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.

Sam Enzina SEPTEMBER 23, 2002

**FILED**  
02 SEP 24 PM 1:21  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA