

P03 0000 44005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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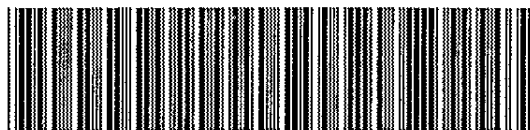
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 APR 17 AM 8:08

F. OVERSTREET
APR 18

TRANSMITTAL LETTER

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

SUBJECT: EAST COAST PROPERTIES OF JACKSONVILLE, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: SCOTT NICHOLSON
Name (Printed or typed)

1300 EAST COAST DR
Address

ATLANTIC BEACH, FL 32233
City, State & Zip

904 710-6640
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

EAST COAST PROPERTIES OF JACKSONVILLE, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1300 EAST COAST DR, ATLANTIC BCH, FL 32233

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE INVESTMENTS

ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES @ \$1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

SCOTT NICHOLSON - (PRES, DIRECTOR, SECY) 1300 EAST COAST DR
ATLANTIC BCH, FL 32233

TINA BLACK-NICHOLSON, (V.PRES, DIRECTOR, TREAS) 14179 DRAKES PONT DR
JACKSONVILLE, FL 32224

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

SCOTT NICHOLSON - 1300 EAST COAST DR
ATLANTIC BCH, ~~FL 32233~~ FL 32233
BCH,

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SCOTT NICHOLSON - 1300 EAST COAST DR
ATLANTIC BCH, FL 32233

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature Registered Agent

Date

Signature Incorporator

Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 APR 17 AM 8:08