

PO3000129144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

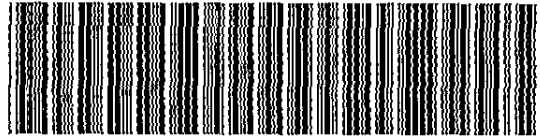
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-11-10

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Gold Coast Pump Repair

Signature _____

Requested by: AW

Name _____

Date 11/10

Time _____

Walk-In _____

Will Pick Up _____

- ☒ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

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:

Gold Coast Pump Repair + Supplies, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2220 S.E. MAWON AVE
Port St. Lucie, FL 34952**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Profit

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

John BATALINI Pres, Sec.
2220 S.E. MAWON AVE
Port St. Lucie, FL 34952**ARTICLE VI REGISTERED AGENT**

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

John BATALINI
2220 S.E. MAWON AVE
Port St. Lucie, FL 34952**ARTICLE VII INCORPORATOR**

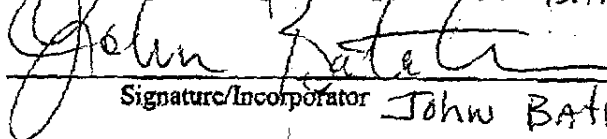
The name and address of the Incorporator is:

John BATALINI
2220 S.E. MAWON AVE
Port St. Lucie FL 34952

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 John BATALINI



Signature/Incorporator John BATALINI

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA10/11/03
Date10/11/03
Date