

P04000061145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

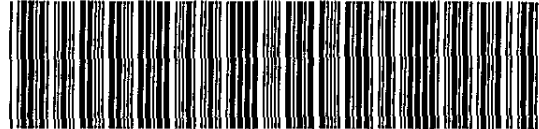
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2004 APR -6 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

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

SUBJECT: COASTAL ROOFING AND WATERPROOFING, 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: GORDON McDONALD
Name (Printed or typed)

P.O. BOX 1729
Address

STUART, FL 34995
City, State & Zip

772-287-1385
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:

COASTAL ROOFING AND WATERPROOFING, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. BOX 1729
STUART, FL 34995

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONTRACTING APPLICATION OF ROOFING AND WATERPROOFING
MATERIALS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

GORDON McDONALD (PRESIDENT)(DIRECTOR)
P.O. BOX 1729 STUART, FL 34995

LLOYD OPPER (VICE PRESIDENT)(DIRECTOR)
1065 27TH AVE. VERO BEACH, FL 32960

ARTICLE VI REGISTERED AGENT

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

LLOYD OPPER
1065 27TH AVE
VERO BEACH, FL 32960

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GORDON McDONALD P.O. BOX 1729 STUART, FL 34995

ARTICLE VIII EFFECTIVE DATE

SHALL BE APRIL 2, 2004

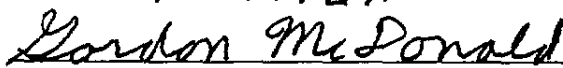
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent
LLOYD OPPER

04,04,04

Date



Signature/Incorporator
GORDON McDONALD

04,04,04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA