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| Certified Copies        | Certificates o       | f Status      |
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| Special Instructions to | Filing Officer:      |               |
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## TRANSMITTAL LETTER

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

| SUBJECT: | TREASURE  | COAST | COATINGS, | INC. |  |
|----------|---|-------|-----------|------|--|
|          | (Proposed surporate name - must include suffix) |       |           |      |  |

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

\$78.75 Filing Fee & Certificate **□\$**122.50

□ \$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: JAMES SIMPSON
Name (Printed or typed)

77.1 SW South Macedo Blud
Address

Port St. L-ucie, Florida 34983

City, State & Zip

(561) 873-1818

Daving Telephone number

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



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 6, 2004

JAMES SIMPSON 771 SW SOUTH MACEDO BLVD PORT ST LUCIE, FL 34983

SUBJECT: TREASURE COAST COATING, INC.

Ref. Number: W04000013323

We have received your document for TREASURE COAST COATING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal office and/or a mailing address in the document.

The registered agent and street address must be consistent wherever it appears in your document.

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) 245-6884.

Letter Number: 004A00022459

Shawn Logan Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

#### ARTICLES OF INCORPORATION

OF

# TREASURE COAST COATINGS, INC.

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

#### ARTICLE I. NAME

The name of this corporation shall be: TREASURE COAST COATINGS, INC. 1603-05 Biltmore Street, Port St. Lucie, Fl. 34953

# ARTICLE II. INITIAL REGISTERED OFFICE AND MAILING ADDRESS

The street address of the initial registered office of this corporation is 1603-05 Biltmore Street, Port St. Lucie, Florida 34984

#### ARTICLE III. CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is 1,000. Such shares shall be of a single class, and shall have a par value of \$1.00 per share.

### ARTICLE IV. INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

Lisa Dunseith 1603-05 Biltmore Street Port St. Lucie, Florida 34953 FILED 04 MR 20 MG

| ARTICLE V. INCORP  | ORATOR   |  |
|--|--|--|
| The name and address of the inco<br>Incorporation are:   | orporator to these   | Articles of                                |
| Leslie Adomaitis<br>1603-05 Biltmore S<br>Port St. Lucie, Florida  |  | 04 MPR 20 M<br>SESCENT COR<br>TALLANK COR  |
| Sesle Chlannest  | 4-13-04  |  |
| Signature/Incorporator   | Date   | 0,7  |
| ARTICLE VI. INITIAL BOARD  | OF DIRECTORS   | <b>,</b>                                   |
| This Corporation shall have one Direct of directors may be either increased or decin accordance with the provisions of the By address of the initial Director of this Corpo  | reased from time<br>-Laws. The name  | to time                                    |
| President - Leslie Adomaiti<br>1603-05 Biltm<br>Port St. Lucie,  | ore St   |  |
| Having been named as registered agent and to accept so corporation at the place designated in this certificate. It registered agent and agree to act in this capacity. I fur provisions of all statutes relating to the proper and con I am familiar with and accept the obligations of my positional properties of the proper | Thereby accept the app<br>rther agree to comply t<br>nplete performance of | cointment as<br>with the<br>my duties, and |
| STATE OF FLORIDA<br>COUNTY OF ST. LUCIE  |  |  |
| The foregoing instrument was acknowledge day of APLI 2004 by LOSIO 40 is personally known to me or who has produced the state of the st | domostis   | who  Auvers  oath.                         |
| Print Name: James C. Simpson  Commission # DD197578  Repires Sep. 13, 2006  Bonded Thru  Atlantic Bonding Co., Inc.  | TOTAL SEASE SEASE  |  |