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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Coastal Apparel Consultants, Inc. d/b/a: CAC, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Michael J. Wrann

Name (Printed or typed)

P.O. Box 1894

Address

Saint Augustine, FL. 32085-1894

City, State & Zip

904-806-1010

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 APPAREL CONSULTANTS, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7 May Street, Saint Augustine, Fl. 32084 (location)
PO Box 1894, Saint Augustine Fl. 32085 (mailing)

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail site selection/real estate

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):

Michael J. Wrann
President
PO Box 1894
Saint Augustine, Fl. 32085-1894

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Michael J. Wrann
7 May Street,
Saint Augustine, Fl. 32084

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael J. Wrann
7 May Street,
Saint Augustine, Fl. 32084

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

9/27/04

Date



Signature/Incorporator

9/27/04

Date

FILED

2004 SEP 29 P 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA