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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
Fax Number : (305) 675-2811

FLORIDA PROFIT CORPORATION OR P.A.

COASTAL LIVING CONCIERGE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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DIVISION OF CORPORATIONS
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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 LIVING CONCIERGE , INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1287 WISCONSIN DR
NAPLES, FL 34103-3854ARTICLE III PURPOSE

The purpose for which the corporation is organized:

The corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR:
CHRISTINA OLSON
1287 WISCONSIN DR
NAPLES, FL 34103-3854FILED
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COASTAL LIVING CONCIERGE, INC.

ARTICLE VI REGISTERED AGENT

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

CHRISTINA OLSON
1287 WISCONSIN DR
NAPLES, FL 34103-3854

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

CHRISTINA OLSON
1287 WISCONSIN DR
NAPLES, FL 34103-3854

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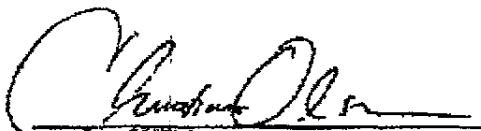
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



CHRISTINA OLSON/ Registered Agent

2/1/05

Date



CHRISTINA OLSON/Incorporator

2/1/05

Date

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