

PO5000106626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/01/05--01031--008 **78.75

05 AUG - 1 AM 9:00
J. Shivers

J. Shivers AUG 02 2005

TRANSMITTAL LETTER

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

SUBJECT: COASTAL DISTRIBUTION CENTER, 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: BRIAN Schneider
Name (Printed or typed)

1512 SE Village Green Dr
Address

Port St Lucie FL 34952
City, State & Zip

772 349-3000
Daytime Telephone number

05 AUG - 1 PM 9:11

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 DISTRIBUTION CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1512 SE VILLAGE GREEN DR.
PORT ST LUCIE FL 34952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WHOLESALE DISTRIBUTION OF HEALTH RELATED PRODUCTS

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BRIAN SCHNEIDER
1512 SE VILLAGE GREEN DR
PORT ST LUCIE FL 34952

ARTICLE VI REGISTERED AGENT

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


BRIAN SCHNEIDER
1512 SE VILLAGE GREEN DR
PORT ST LUCIE FL 34952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BRIAN SCHNEIDER
1512 SE VILLAGE GREEN DR
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

7/29/05

Date



Signature/Incorporator

7/29/05

Date

05 AUG - 1 AM 9:01