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September 20, 2005

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Coastal Insurance Agency of Gulf County, Inc.

**Filing Evidence**

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

**Retrieval Request**

- ☐ Photocopy
- ☐ Certified Copy

**Type of Document**

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include  
Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

| NEW FILINGS |                   |
|-------------|-------------------|
| X           | Profit            |
|             | Non Profit        |
|             | Limited Liability |
|             | Domestication     |
|             | Other             |

| AMENDMENTS |                                    |
|------------|------------------------------------|
|            | Amendment                          |
|            | Resignation of RA Officer/Director |
|            | Change of Registered Agent         |
|            | Dissolution/Withdrawal             |
|            | Merger                             |

| OTHER FILINGS |                  |
|---------------|------------------|
|               | Annual Reports   |
|               | Fictitious Name  |
|               | Name Reservation |
|               | Reinstatement    |

| REGISTRATION/QUALIFICATION |                   |
|----------------------------|-------------------|
|                            | Foreign           |
|                            | Limited Liability |
|                            | Reinstatement     |
|                            | Trademark         |
|                            | Other             |

**ARTICLES OF INCORPORATION**  
**OF**  
**COASTAL INSURANCE AGENCY OF GULF COUNTY, INC.**

FILED  
05 SEP 20 PM 5:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned subscribers to these Articles of Incorporation, being natural persons, competent to contract, hereby form this corporation under the laws of the State of Florida.

**ARTICLE I**

**NAME**

The name of this corporation is COASTAL INSURANCE AGENCY OF GULF COUNTY, INC.

**ARTICLE II**

**TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE III**

**NATURE OF BUSINESS**

The general nature of the business to be transacted by this corporation is to manufacture, purchase, or otherwise acquire, and to own, mortgage, pledge, sell, assign, transfer, or otherwise dispose of, and to invest in, trade in, deal in and with, goods, wares, merchandise, real and personal property, and services of every class, kind and description; except that it is not to conduct a banking, safe deposit trust,

surety, express, railroad, canal, telephone, telegraph, or cemetery company, a building and loan association, fraternal benefit society, state fair, nor exposition.

#### **ARTICLE IV**

##### **PRINCIPAL OFFICE AND MAILING ADDRESS**

The principal place of business of the corporation is at 312 Reid Avenue, Port St. Joe, Florida 32456. The mailing address of the corporation is 312 Reid Avenue, Port St. Joe, Florida 32456.

#### **ARTICLE V**

##### **REGISTERED OFFICE AND REGISTERED AGENT**

The initial registered office is at 4450 Lafayette Street, Marianna, Florida. The name of the initial registered agent at that address is Frank E. Bondurant. The Board of Directors may, from time to time, move the initial registered office of the corporation to any other address in the State of Florida.

#### **ARTICLE VI**

##### **AUTHORIZED SHARES**

The maximum number of shares of stock that this corporation is authorized to have outstanding at one time is 1000 shares of common stock having a par value of \$1.00 per share.

**ARTICLE VII**

**INITIAL CAPITAL**

The amount of capital with which this corporation will begin business is not less than \$100.00.

**ARTICLE VIII**

**DIRECTORS**

This corporation shall have two (2) directors, initially. The number of directors may be increased or diminished from time to time by bylaws adopted by the stockholders, but shall never be less than one (1).

**ARTICLE IX**

**INITIAL DIRECTORS**

The names and post office addresses of the members of the first Board of Directors are:

**NAME**

**ADDRESS**

Dwight E. Van Lierop

12998 SW CR 275  
Blountstown, FL 32424

Sheree S. Van Lierop

12998 SW CR 275  
Blountstown, FL 32424

**ARTICLE X**


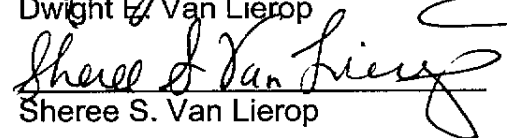
**SUBSCRIBERS**

The names and post office addresses of the subscribers to these Articles of Incorporation, the number of shares each agrees to take, and the value or consideration therefor, are:

| <u>NAME</u>          | <u>ADDRESS</u>                           | <u>CONSIDERATION</u> | <u>SHARES</u> |
|----------------------|--|----------------------|---------------|
| Dwight E. Van Lierop | 12998 SW CR 275<br>Blountstown, FL 32424 | \$50.00              | 50            |
| Sheree S. Van Lierop | 12998 SW CR 275<br>Blountstown, FL 32424 | \$50.00              | 50            |

**AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed to them by the stockholders, and approved at a stockholders' meeting by majority of the stock then entitled to vote thereon, unless the directors and the stockholders sign a written statement manifesting their intention that a certain amendment to these Articles of Incorporation be made.

  
Dwight E. Van Lierop  
  
Sheree S. Van Lierop

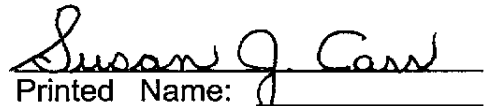
STATE OF FLORIDA

COUNTY OF JACKSON

I HEREBY CERTIFY that before me, the undersigned authority, personally appeared **DWIGHT E. VAN LIEROP and SHEREE S. VAN LIEROP**, personally known to me, who did not take an oath, known to be the persons described in and who executed the foregoing Articles of Incorporation as SUBSCRIBERS, and they acknowledged before me that they subscribed to those Articles of Incorporation.

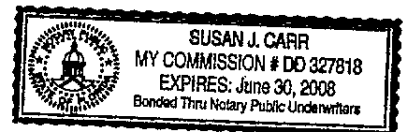
WITNESS my hand and official seal this the 13<sup>th</sup> day of SEPTEMBER, 2005.

NOTARY PUBLIC

  
Printed Name: \_\_\_\_\_  
State of Florida at Large  
Commission Number:  
Commission Expires:

THIS INSTRUMENT PREPARED BY:

Frank E. Bondurant  
Florida Bar Number: 0520330  
BONDURANT AND FUQUA, P.A.  
4450 Lafayette Street  
Post Office Box 1508  
Marianna, Florida 32447  
(850) 526-2263



**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OF PROCESS WITHIN THIS STATE,  
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

FIRST - That COASTAL INSURANCE AGENCY OF GULF COUNTY, INC., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation, and its registered office in the City of Marianna, Jackson County, Florida, has named Frank E. Bondurant, whose address is 4450 Lafayette Street, Marianna, Florida 32446, as its agent to accept service of process within this State.

SECOND - Having been named to accept service of process for the above-stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and further agree to comply with the provisions of said Act relative to keeping open said office.

  
FRANK E. BONDURANT,  
Registered Agent

05 SEP 2006 PM 5:06  
FILED  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE