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COVER LETTER

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

SUBJECT: FLO	RIDA COASTAL PROPE	ERTIES, CORP.	,	
	(PROPOSED CORPORA'	FE NAME – <u>MUST INCL</u>		
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	OLGA PRIGODA Name (Printed or typed)			
6 VIA BELLANO Address PALM COAST, FL 32137 City, State & Zip				

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

Daytime Telephone number

"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:

FLORIDA COASTAL PROPERTIES, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

BUSINESS ADDRESS: 4867 NW PALM COAST PKWY, SUITE 1C, PALM COAST, FL 32164

MAILING ADDRESS: 138 NE PALM COAST PKWY, SUITE 380, PALM COAST, FL 32137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

OLGA PRIGODA - DIRECTOR 6 VIA BELLANO PALM COAST, FL 32137

ARTICLE VI REGISTERED AGENT

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

OLGA PRIGODA 6 VIA BELLANO PALM COAST, FL 32137

ARTICLE VII __INCORPORATOR

The <u>name and address</u> of the Incorporator is:

OLGA PRIGODA 6 VIA BELLANO PALM COAST, FL 32137

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

Olfa Prifoda 07/19/06
Signature/Registered Agent Date
Olfa Prifodal 07/19/06
Signature/Incorporator Date

06.101.21 FH 1:02