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2007 MAR -7 PM 3:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1007-9946

T. Hampton MAR -7 2007

## COVER LETTER

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

SUBJECT: First Coast Research Corp.  
(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: Kimberly W. Williams  
Name (Printed or typed)  
3500 Townsend Blvd. # 215  
Address  
Jacksonville, FL 32217  
City, State & Zip  
904-208-1122  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 27, 2007

KIMBERLY L WILLIAMS  
3500 TOWNSEND BLVD  
# 215  
JACKSONVILLE, FL 32277

SUBJECT: FIRST COAST RESEARCH CORP.  
Ref. Number: W07000009946

We have received your document for FIRST COAST RESEARCH CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

- 1) Please list the name of the registered agent in article VI.
- 2) Please list a complete address for the incorporator in article VII.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Document Specialist  
New Filing Section

Letter Number: 207A00014177

RECEIVED  
07 MAR - 7 PM 12:25  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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:

*First Coast Research Corp.*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*3500 Townsend Blvd. # 215  
Jacksonville, FL 32277*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*Information Resource*

**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):

*Kimberly Williams President  
Jacoby Freeman Investor*

**ARTICLE VI REGISTERED AGENT**

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

*3500 Townsend Blvd. # 215  
Jacksonville, FL 32277*

*Kimberly Williams*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*Kimberly Williams  
3500 Townsend Blvd. # 215  
Jacksonville, FL 32277*

\*\*\*\*\*  
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

*Kimberly Williams*

Signature/Registered Agent

*2/22/07*

Date

*Kimberly Williams*

Signature/Incorporator

*2/22/07*

Date

**FILED**

2007 MAR -7 PM 3:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*corrected*

*corrected*