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(Requestor's Name)	
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PICK-UP WAIT MAI	L
(Business Entity Name)	
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(Document Number)	
Certified Copies Certificates of Status	
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COVER LETTER

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

SUBJECT:	GOLD COAS			١C
Enclosed are an orio	ginal and one (1) copy of the artic	eles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Stuart Co Name			
	Bo(2 Rato City, 561-71		33428	

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:	0
GOLD COAST NOVELTIES INC.	8 1510 1510 1500
	SECRETARY IVISION OF C
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	PH RPOFS
11101 mohawic st	بر مراقع مراجع بي
Boca Ration, tha 33428	PH 3: 32
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
internet sales	
ARTICLE IV SHARES	
The number of shares of stock is:	, ask
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): (4) 5 e crefory. President: Allen Borsuk 171 Greenbus ice President: Stuart COLED	17893 8940
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	- Loxorabatch a
List name(s), address(es) and specific title(s): (4) 5 e crefory.	- Bob Johnson Fla, 334
President: Allen Borsuk 171 Greenbus	L Circle, thornhill, Ontario
ice President: Stuart COLED	" (anada 445-568
reasurer: Dale Adelman Boco Roton, Cla	7 33/38
1110) Mohawle St clasurer: Dale Adelman Boco Roton, Cla ARTICLE VI REGISTERED AGENT 0500 Marina The name and Florida street address (P.O. Box NOT acceptable) of the	may Bora Ration Ma
	e registered agent is:
Elayre coted	
11101 Mohawicst Bois Raton, Da 33428	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Relayne Coikerans	
Bocz Rolon (1a 33428	

Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree	
Q 0 -	1-18
Simulation (Capella)	<u> 118108</u>
Signature/Registered Agent	Date
Signature/Incorporator	
NIVIACOTECHUCOTINICALO	LME