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(Requestor's Name)

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(Business Entity Name)

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2008 APR 11 PM 4:25
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TALLAHASSEE, FLORIDA

T. Burch APR 11 2008

COVER LETTER

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

SUBJECT: Gulf Coast Insurance Inspections, 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: Danielli Austin

Name (Printed or typed)

16520 S. Tamiami Trail 18-298

Address

Fort Myes, FL 33908

City, State & Zip

239-450-4362

Daytime Telephone number

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:

Gulf Coast Insurance Inspections, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

16520 S. TAMiami TRAIL #18-298
FORT MYERS FL 33908

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide Home Inspections

ARTICLE IV SHARES

The number of shares of stock is:

2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Danielli M. Austin, 17150 Caloosa Trace Circle, Fort Myers, FL 33967; President
Mark E. Biddison, 12832 Iona Road, Fort Myers, FL 33908; Vice President

ARTICLE VI REGISTERED AGENT

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

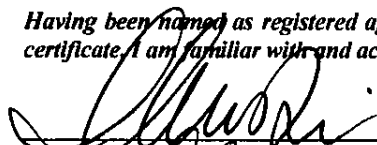
Danielli Austin
17150 Caloosa Trace Circle
Fort Myers, FL 33967

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Danielli Austin
17150 Caloosa Trace Circle
Fort Myers, FL 33967

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



Signature/Incorporator

4/8/08

Date
4/8/08

Date

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2008 APR 11 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA