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COVER LETTER

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

	Coat, Inc. (PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
losed are an orig	inal and one (1) copy of the ar	ticles 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
		ADDITIONAL CO	Status
	•		
FROM: Mic	hael Gray		
	Nam	e (Printed or typed)	
<u>771</u>	Whitemire Dr.	4.11	
		Address	
Mell	oourne, FL 32935		
	City	, State & Zip	
407-	616-3008		
407-		l'elephone 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)	
in compliance with chapter our andrer chapter ozi, i.s. (i tone)	
ARTICLE I NAME The name of the corporation shall be: Perma-Coat, Inc.	
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is:	
771 Whitmire Dr. Melbourne, FL 32935	
, , , , , , , , , , , , , , , , , , , ,	Em 5
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Distribution of construction materials	FILED JAN -6 PH 12: 59 CREIVER OF STAIL LANASSEE, FLORED
ARTICLE IV SHARES	
ARTICLE IV SHARES The number of shares of stock is: 10,000	59 59
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Michael Gray Secretary Treasurer Mike Gray, President	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered ages Mischael Gray 771 whitmire Dr Melbourne, FL 32935	nt is:
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Michael Gray 771 Whitmire Dr	
Me16ourne, FL 32935	

Having been named as registered agent to accept service of process for the above st place designated in this certificate, I am familiar with and accept the appointment agree to act in this capacity	
mgree to me on any capacity	

Signature/Registered Agent

Signature/Incorporator