

P10000094471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

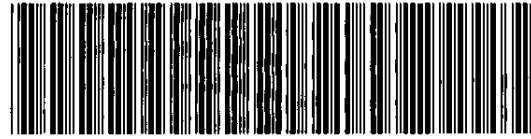
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000187079760

10/28/10--01031--002 **70.00

WLB-51256

FILED

2010 NOV 16 PM 3:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1 Bush NOV 18 2010

COVER LETTER

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

SUBJECT: Coast to Coast Enterprises, 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: Kerry Martin
Name (Printed or typed)

P.O. Box 3915
Address

Sarasota, Florida 34230
City, State & Zip

941-400-8597
Daytime Telephone number

Kerry Martin CPA @ Yahoo.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
10 NOV 16 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 2, 2010

KERRY MARTIN
PO BOX 3915
SARASOTA, FL 34230

SUBJECT: COAST TO COAST ENTERPRISES, INC.
Ref. Number: W10000051256

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

An effective date may be added to the Articles of Incorporation **if a 2011 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected 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) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 510A00025807

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: Coast to Coast Enterprises ~~LLC~~ of Tampa, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3909 Northampton Way
Tampa, FL 33618

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: Ten

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrew Scott Robinson
Address: (Officer)
3909 Northampton Way
Tampa, FL 33618

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Andrew Scott Robinson
Address: 3909 Northampton Way
Tampa, FL 33618

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kerry Martin
Address: P.O. Box 3915
Sarasota, FL 34230

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

S/S
Required Signature/Registered Agent

10/6/10
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Kerry Martin
Required Signature/Incorporator

10/6/2010
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 NOV 16 PM 3:50

FILED