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**COVER LETTER**

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

**SUBJECT: C & C GREELEY 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: NICOLE HUMMEL, COASTAL TAX SERVICE

Name (Printed or typed)

1717 US HWY. 1

Address

FORT PIERCE, FL 34950

City, State & Zip

(772) 460-8360

Daytime Telephone number

coastaltax@aol.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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: **C & C GREELEY INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**2023 JACARANDA AVE.**  
**FORT PIERCE, FL 34949**

Mailing address, if different is:

**COASTAL TAX SERVICE**  
**1717 US HWY 1**  
**FORT PIERCE, FL 34950**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**PROPERTY DEVELOPMENT AND LEASING**

**ARTICLE IV SHARES**

The number of shares of stock is: **100,000**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: **CHARLES L. GREELEY, PRES.**  
Address: **COASTAL TAX SERVICE**  
**1717 US HWY 1**  
**FORT PIERCE, FL 34950**

Name and Title: **CAROLYN J. GREELEY, VP, S, T.**  
Address: **COASTAL TAX SERVICE**  
**1717 US HWY 1**  
**FORT PIERCE, FL 34950**

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: **NICOLE HUMMEL**  
Address: **1717 US HWY 1**  
**FORT PIERCE, FL 34950**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **CHARLES L. GREELEY, PRES.**  
Address: **2023 JACARANDA AVE.**  
**FORT PIERCE, FL 34949**

*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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

**2/16/2011**  
\_\_\_\_\_  
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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

**2-16-11**  
\_\_\_\_\_  
Date

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DEPARTMENT OF STATE