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(Requestor's Name)		
(Address)		
(Address)		
(Cit	ty/State/Zip/Phon	e #)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
•	-	
Special Instructions to Filing Officer:		
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Office Use Only



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COVER LETTER

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

SUBJECT: Green Coast Flooring, Inc.					
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)					
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:				
., .,					
\$70.00 \$78.75	\$78.75				
☐ Filing Fee ☐ Filing Fee	Filing Fee,				
& Certificate of Status	& Certified Copy Certified Copy				
	& Certificate of				
	Status				
	ADDITIONAL COPY REQUIRED				
FROM: Thiago P. Nascimento					
Name	(Printed or typed)				
5000 Harbour Olyah Dd					
5830 Harbour Club Rd. Address					
•					
Fort Myers, FI 33919					
City, State & Zip					
•	· A				
704-771-5527	elephone number				
Daytime Telephone number					
marcia@griffininteriordesign.com E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used for future annual report notification)					

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I N	AME Green Coast Flooring, Incoration shall be:) .	FILED
ARTICLE II P	RINCIPAL OFFICE		40 HN 0 PM 1-57
	Principal street address	Ma	ailing address, if different is:
Thi	ago P. Nascimento		S S L CARY OF STATE
583	0 Harbour Club Rd		TALLAHASSEE, FLORIDA
<u>For</u>	t Myers, Fl 33919	· · · · · · · · · · · · · · · · · · ·	TALLAHAGGET, LEGHIDA
ADMINI DI	TDDOG#		
The number for which	th the corporation is organized is:		
	nder Florida Laws		
DO business un	idel i lolida Laws		
ARTICLE IV SI			
i ne number of snares	of stock is: 100		
ARTICLE V IN	VITIAL OFFICERS AND/OR DIRECTORS	1	
	:Thiago P. Nascimento - President		
Address:	5830 Harbour Club Rd.	Address:	
	Fort Myers, Fl 33919		
		_	
Name and Title	:	Name and Title	
Address:			
Address:		Address:	
		_	
			
	•		
Address:		Address:	
		_	
ARTICLE VI RI	EGISTERED AGENT		
	a street address (P.O. Box NOT acceptable) of the	ne registered agent	is:
Name:	Thiago P. Nascimento		
Address:	5830 Harbour Club Rd		
	Fort Myers, Fl 33919		
4000010101	MODBOD AMOD		
	CORPORATOR		·
Name:	ss of the Incorporator is: Thiago P. Nascimento		
Address:	5830 Harbour Club Rd		
Address.	Fort Myers, Fl 33919		
	I WILLING S. I I WOO I W		
	as registered agent to accept service of process j		
this certificate, I am fo	amiliar with and accept the appointment as regis	tered agent and ag	ree to act in this capacity
1/~	1/04		
Ihrus.	Com		01/05/2012
	Required Signature/Registered Agent		Date
	and and affirm that the first state of heavy and	m.	hat the Color information when it is a
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.			
wcumen w ine Depa	rimeni oj siwe constitutes a intra aegree jelony (is provided for in S	.01/.133, F.D.
	10 1		04/05/0040
Juny 1	Required Signature/Incorporator	· · · · · · · · · · · · · · · · · · ·	01/05/2012 Date
	redanch eigharaich incorborator		Date