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(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:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
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	(Document Number)
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Special Instructions to Filing Officer:	
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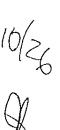
Office Use Only



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COVER LETTER

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

SUBJECT: Coastal Solutions of NV	/ Florida, LLC	<u> </u>
(PROPOSED CORPORAT	E NAME – <u>MUST INCI</u>	.UDE SUFFIX)
Enclosed are an original and one (1) copy of the articl	es of incorporation an	d a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
• • • • • • • • • • • • • • • • • • •	:	:
FROM: Michelle L. Abrams		
Name (Printed or typed)	
1726 Sound Creek Court	dress	
Navarre, FL 32566 City, St	tate & Zip	
850-939-2045 Daytime Tel	ephone number	······································
works2hard@hotmail.com E-mail address: (to be used to	or future annual report	notification)

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)

RTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing add	ress, if different is:
	1726 Sound Creek Court		The second secon
	Navarre, FL 32566		
OTICI E III	PURPOSE		
	which the corporation is organized is:		
	lawful business		
·,			
RTICLE IV	SHARES		
	nares of stock is:1,000		
RTICLE V	INITIAL OFFICERS AND/OR DIRECTO	ORS	
	Title:Michelle L. Abrams, President		
Address:	1726 Sound Creek Court		
	Navarre, FL 32566		
	Title:		
Address:			
Name and	Title:		
Address:		Address:	
			
			15 (4)
	REGISTERED AGENT		8 14
	lorida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Michelle L. Abrams		
Address:	1726 Sound Creek Court	<u> </u>	
	Navarre, FL 32566		ment of market o
TICLE VII	INCORPORATOR		ယ္ ့ႏွံ
	ddress of the Incorporator is:		က ြ
Name:	Michelle L Abrams		F 5
Address:	1726 Sound Creek Court		
	Navarre, FL 32566		
ving been nar	med as registered agent to accept service of proc	cess for the above stated corpora	ition at the place designate
certificate, I	am familiar with and accept the appointment as r	registered agent and agree to act	in this capacity
۱ ۱			حيلييان
1 1 1 L Y	Required Signature/Registered Agent		10/10/19
1200			