# P1400052235

(Red	questor's Name)	
(Address)		
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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06/11/14--01013--003 \*\*128.75



### **COVER LETTER**

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

SUBJECT: VA FEIN 46-1097049 Coastal Crawin Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

### **FEES:**

Certificate of Domestication \$ 50.00 Articles of Incorporation and Certified Copy \$ 78.75 Total to domesticate and file \$128.75

## **OPTIONAL:**

Certificate of Status \$	8.75
Heather Stor	
Name (printed	or typed)
13625 N. India Addres	a River DR
Addres	S
Sebastian FL	32958
City, State &	& Zip
757-771-5	
Daytime Telepho	ne Number
Coastal Clau's	in @ gmail. com
F-mail address: (to be used for futu	re annual report notification)

CERTIFICATE OF DOMESTICATION		
Th	he undersigned, Heather Stover, President, (Title)	
of in	(Corporation Name) accordance with s. 607.1801, Florida Statutes, does hereby certify:	
1.	The date on which corporation was first formed was Octobel 1, 2012.	
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was	
3.	•	
4.	The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Coastal Charin Inc.	
5.	The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was	
6.	Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.	
I a	nm President, of Coastal Chavin Inc.	
	and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done of this the 3th day of July 2014  (Authorized Signature)  Filing Fee:	PINESTER HOUSE
	Filing Fee:  Certificate of Domestication \$ 50.00  Articles of Incorporation and Certified Copy \$ 78.75  Total to domesticate and file \$128.75	

# ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME		
THE NAME OF THE CORPORATION SHALL BE:	_	
Cochi	l Cravin Inc.	
	~ GROWIN INC.	
ARTICLE II PRINCIPAL OFFICE		
THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:		
Principal Address	Mailing Address	
13625 N. Indian River DR	5000	
12692 10. TUSMON DIVING PIK	Sure	
Sebastian FL 32958		
ARTICLE III PURPOSE		
THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZ	ED:	
Food Vendor		
10000 1010001-		<del></del>
		<del>2</del> 2
		_
		<b>7</b>
		A
		Q
		5
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ARTICLE IV SHARES	CK 18. 10	
THE NUMBER OF SHARES OF STO	CK IS:	
ARTICLE V INITIAL DID THE NAME(S) AND ADDRESS(ES)	RECTORS AND/ OR OFFICERS	
, ,		
Title/Name	Title/Name	
	ther Stover	· · · · · · · · · · · · · · · · · · ·
13625	N Indian River DR	
Sebas	tian FL 32958	
Title/Name	Title/Name	
Director - Bruce		
13625	J. Indian River DR	
Subas	tan FL 32958	<b>*</b>
Title/Name	Title/Name	
		AH O
		0:5)
		····
Title/Name	Title/Name	

THE NAME AND FLORIDA STREET ADDRESS (P.O. BO	X NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
Heather Stover	
Sebastian FL 32958	
secostian PC 32730	
ARTICLE VII INCORPORATOR	THE SULL PROPERTY OF THE PARTY
THE <b>NAME AND ADDRESS</b> OF THE INCORPORATOR IS:	
Heather Stover	
13625 N. Indian River DR	AH D. S
Subastian FL 32958	<b>一</b> 賞
**************************************	TO TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATI	ed in this certificate, I am familiar with and
ACCEPT THE APPOINTMENT AS REGISTERED AGE.	NT AND AGREE TO ACT IN THIS CAPACITY.
Heather Stoven	6-8-14
Signature/Registered Agent	Date
Stath. Jon	6-8-14
Signature/Incorporator	Date
- · · ·	

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS