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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

158 7/30/14

COVER LETTER

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

SUBJECT: SEACOAST ADVERTISING OF FLORIDA 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: **JAMES L BUTLER**
Name (Printed or typed)

3854 NW 89TH WAY
Address

HOLLYWOOD, FL 33024
City, State & Zip

954-559-9134
Daytime Telephone number

randyw1285@aol.com
E-mail address: (to be used for future annual report notification)

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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)

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ARTICLE I NAME
The name of the corporation shall be: SEACOAST ADVERTISING OF FLORIDA INC

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
3854 NW 89TH WAY
HOLLYWOOD, FL 33024

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS IN FLORIDA.

ARTICLE IV SHARES 100
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JAMES L BUTLER, PRESIDENT Name and Title: _____
Address 3854 NW 89TH WAY Address: _____
HOLLYWOOD, FL 33024

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

ARTICLE VI REGISTERED AGENT

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

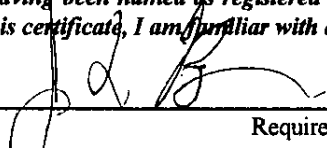
Name: JAMES L BUTLER
 Address: 3854 NW 89TH WAY
HOLLYWOOD, FL 33024

ARTICLE VII INCORPORATOR

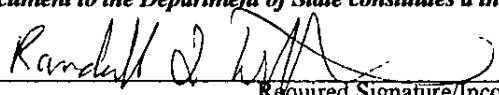
The **name and address** of the Incorporator is:

Name: RANDALL WILLIAMSON
 Address: 4650 SW 47 TERRACE
DAVIE, FL 33314

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 7/21/14 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 7/21/14 Date

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