

PS000069399

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000201893 3)))



H150002018933ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

***Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
TOP COASTAL SERVICES, INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

15 AUG 20 PM 4:47

15 AUG 20 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H15000201893

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

ARTICLE I NAME: The name of the corporation is:

Top Coastal Services, Inc

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

2044 Maravilla Circle

Fort Myers, FL 33901

ARTICLE III SHARES: The number of shares of stock is:

100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Gladys Hernandez - 50% President

David Hernandez - 25% Vice President

Brandi Hernandez - 25% Secretary

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

David Hernandez

2044 Maravilla Circle

Fort Myers, FL 33901

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Gladys Hernandez

3325 SW Perrine St.

Port Saint Lucie, FL 34953

SECRETARY
TALLAHASSEE
FLORIDA

15 AUG 20 AM 9:01

FILED

H15000201893

H15000201893

Required Signatures:

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


Registered Agent

8/20/15
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.


Incorporator

8/20/15
Date

FILED
15 AUG 20 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H15000201893