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SECRETARY OF STATE
DIVISION OF CORPORATIONS

W16-021307

04/04/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 22, 2016

MARK HOEFT
P.O. BOX 493
GULF BREEZE, FL 32562

SUBJECT: THE FLORIDA COAST INC
Ref. Number: W16000021307

We have received your document for THE FLORIDA COAST INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L14000172803.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 116A00005833

COVER LETTER

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

SUBJECT: THE FLORIDA COAST.COM 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: MARK HOEFT

Name (Printed or typed)

PO BOX 493

Address

GULF BREEZE, FL 32562

City, State & Zip

850-525-2765

Daytime Telephone number

MARK@THEFLORIDACOAST.COM

E-mail address: (to be used for 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)

ARTICLE I NAME

The name of the corporation shall be: THE FLORIDA COAST.COM INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
222 WEIS LANE

SUITE 1A

PENSACOLA, FL 32507

Mailing address, if different is:
c/o MARK HOEFT

PO BOX 493

GULF BREEZE, FL 32562

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARK HOEFT P/T

Address 222 WEIS LANE

SUITE 1A

PENSACOLA, FL 32507

Name and Title: NICOLAS HOEFT VP/S

Address: 222 WEIS LANE

SUITE 1A

PENSACOLA, FL 32507

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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STATE OF FLORIDA
DIVISION OF CORPORATIONS
15 APR - 4 PM 3:44

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: MARK HOEFT
Address: 222 WEIS LANE 1A
PENSACOLA, FL 32507

ARTICLE VII INCORPORATOR

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

Name: MARK HOEFT
Address: 222 WEIS LANE 1A
PENSACOLA, FL 32507

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Mark a Hoff 4/1/2016
Required Signature/Registered Agent 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.

Mark a Hoff 4/1/2016
Required Signature/Incorporator Date