

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

- FIRST: The name of the corporation as currently filed with the Florida Department of State:
COAST GLOBAL CORP
- SECOND: The document number of the corporation: P19000025165
- THIRD: The file date of the articles of incorporation: March 19, 2019
- FOURTH: None of the corporation's shares have been issued.
- FIFTH: No debt of the corporation remains unpaid.
- SIXTH: The net assets of the corporation remaining after winding up, if any, have been distributed.
- SEVENTH: A majority of the incorporators or directors authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: GUILIN JOLICOEUR P
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

Name of Corporation:

COAST GLOBAL CORP

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

THIS ENTITY WAS CREATED UNDER MY SOCIAL SECURITY THE FEIN IS ATTACHED TO MY NAME. JOSEPH L. LAPAIX FRAUDULENTLY RE- ADDED HIS NAME AS PRESIDENT WITHOUT MY CONSENT; THERE BECAUSE THE FEIN IS ATTACHED TO MY LEGAL NAME, I WANT TO DISSOLVE IT.

Mailing address where claims can be sent:

10130 NORTHLAKE BLVD.
SUITE.#214-238
LOXAHATCHEE, FL 33470 UN

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: GUILIN JOLICOEUR

Electronic Signature of the Person Filing