

P21000093594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

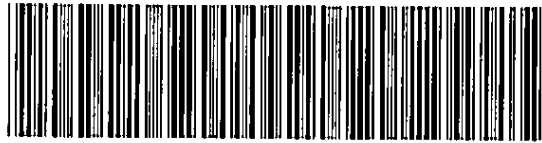
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500375920575

FILED

2021 NOV - 1 PM 1:53

CLERK OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2021 NOV - 1 PM 2:31

CLERK OF STATE
TALLAHASSEE, FLORIDA

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 11/1/2021

NAME: SUN COAST REAL ESTATE INSPECTIONS, CORP

TYPE OF FILING: ARTICLES

COST: 70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

A. Hodge

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: Sun Coast Real Estate Inspections, Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8350 BEE RIDGE ROAD STE 124

8350 BEE RIDGE ROAD STE 124

SARASOTA, FL 34241

SARASOTA, FL 34241

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: HOME INSPECTIONS

To engage in any lawful act or activity for which corporations may be organized.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSEPH M LICAUSI, President

Name and Title: _____

Address 8350 BEE RIDGE ROAD STE 124

Address: _____

SARASOTA, FL 34241

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
2021 NOV - 1 PM 1:53
CLERK OF STATE
TALLAHASSEE, FLORIDA

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: JOSEPH M LICAUSI,
Address: 8350 BEE RIDGE ROAD STE 124
SARASOTA, FL 34241

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSEPH M LICAUSI,
Address: 8350 BEE RIDGE ROAD STE 124
SARASOTA, FL 34241

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

X



Required Signature/Registered Agent

10-29-2021

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.

X



Required Signature/Incorporator

10-29-2021

Date