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PICK-UP WAIT MAIL

(Business Entity Name)

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FILED
2023 SEP - 1 PM 12:42
TALLAHASSEE, FL

T. MATTHEWS

SEP 18 2023

COVER LETTER

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

SUBJECT: Green Coast Holding Services Co.
(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: TAVAS, LLC
Name (Printed or typed)
3850 N Wilke Road
Address
Arlington Heights, IL 60004
City, State & Zip
(800) 595-4176
Daytime Telephone number
whitney@greencoastexteriors.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)

FILED

ARTICLE I NAME

The name of the corporation shall be: Green Coast Holding Services Co.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

120 15th St NW
Naples, FL 34120

STATE OF FLORIDA
TALLAHASSEE, FL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to act as a holding company

ARTICLE IV SHARES

The number of shares of stock is: 1,000 (See Exhibit A)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jerramy Johnson, Director
Address: 120 15th St NW, Naples, FL 34120
Name and Title: Whitney Johnson, Director
Address: 120 15th St NW, Naples, FL 34120

Name and Title: Christina Bruce, Director
Address: 120 15th St NW, Naples, FL 34120

Name and Title:
Address:
Name and Title:
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: Whitney Johnson _____
Address: 120 15th St NW _____
Naples, FL 34120 _____

ARTICLE VII INCORPORATOR

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

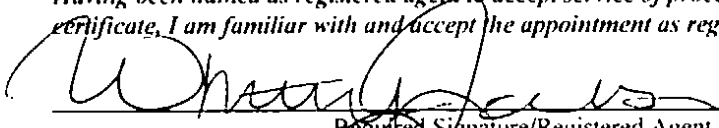
Name: Whitney Johnson _____
Address: 120 15th St NW _____
Naples, FL 34120 _____

ARTICLE VIII EFFECTIVE DATE:

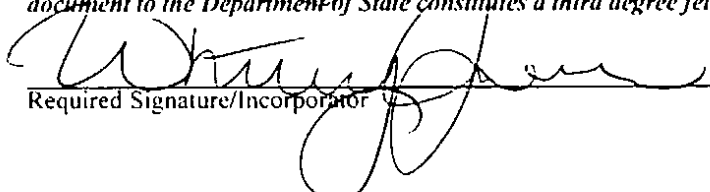
Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 _____ Date 8-22-23
Required Signature/Registered Agent

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.

 _____ Date 8-22-23
Required Signature/Incorporator