

Florida Department of State
Division of Corporations
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P 2400076047

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To:

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

From:

Account Name : RASI 5
Account Number : I20040000031
Phone : (800)906-9220
Fax Number : (800)906-9880

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

Email Address: _____

DOMESTICATION
COASTLINE DEMOLITION AND REMOVAL INC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$128.75

RECEIVED

2024 DEC 17 AM 10:09

STATE
SECRETARY
TALLAHASSEE, FL

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: COASTLINE DEMOLITION AND REMOVAL INC

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is.

425 SE 1ST STREET APT 908POMPANO BEACH, FL 33060**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: MATTHEW J O'TOOLE, DIRECTOR

Name and Title: _____

Address 425 SE 1ST STREET APT 908

Address: _____

POMPANO BEACH, FL 33060

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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: REGISTERED AGENT SOLUTIONS, INC.
Address: 2894 REMINGTON GREEN LN. STE. A
TALLAHASSEE, FL 32308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MATTHEW J O'TOOLE
Address: 425 SE 1ST STREET APT 908
POMPANO BEACH, FL 33060

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.)

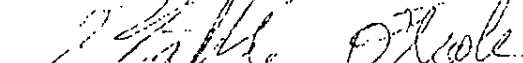
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

/s/ Naomi Ostopowitz, Assistant Secretary on behalf of Registered Agent Solutions, Inc. 12/16/24

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.

 12/13/24
Required Signature/Incorporator Date