# P9500012044

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassae, FL 32314

Tallahassoo, FL 3231	4			10
		AST Fool	CONTINOS	INC.
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Enclosed is an origination:	al and one (1) cop	y of the articles of	incorporation and a c	heck
= \$70.00 Filing Faa	\$78.75 Filing Foo & Cordicato	\$122.50 Filing Fac & Certified Copy	X  \$131.25 Filing Foo, Certified Copy & Certificate	
FROM:		LOCIAN G	<u>EDNART</u>	

Name (printed or typed)

12245 684 N

Address

LARGO FL 34643

City, State & Zip

(813) - 536 - 6873

Daytime Telephone number

51)(

NOTE: Please provide the original and one copy of the articles.

### ARTICLES OF INCORPORATION

SSEED DH 2: IQ

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

#### ARTICLE | NAME

The name of the corporation shall be:

INTER COAST POOL CCATINGS INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall ba:

P.U. BOX 2367 PINELLAS PARK, FL 34664-2367

OR (12245 684 ST.N. LAKGO, FL 34643)

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 5/18845

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

12245 68 "STN LARGO FL 34643

## ARTICLE V INCORPORATOR(S)

The name(s) tion is(are):	and stroot	nddress(es  -} ERB	of the ind (:-E-1/+)	corporator(s) t パパチ	o thosa Ar	ticles of	Incorpora-
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The undersign	ned incorpo	rator(s) ha	s(havo) exi	acuted these /	Articles of	Incorpor	ation this
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	·		Signatur	re	<del></del>		

Articles of Incorporation Filing Fee - \$35

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the corporation is: TNTER COAST Pec	ol COMINGS INC
***************************************	
2. The name and address of the registered agent and office is:	
HERB GEBHART	
(Name)	
12245 68-MOST N	
(P.O. Box not acceptable)	
1.AEGO, FL. 34643	
(City/State/Zip)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature) 2/7/45 (Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314