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97 JUN -4 PH 12: 09

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SECRETARY OF SHAFE

JALLARYS TO TO SECRETARY OF SHAFE

-06/04/37--01032--009

\*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT:	CARIPREAN COATINGS CORPORATION (Proposed corporate name - must include suffix)		
Enclosed is an origin	al and one(1) copy of the articles		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy  ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate  PY REQUIRED
FROM:	FROM: Barbara D. Oeffner  Caribbean Continue (Pinner by typed) on  306 Yacht Club Way P. O. Box 1235  Address  Moore Haven, FL 33471  City, State & Zip  (941) 946-0348		
	Daytime T	elephone number	

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

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## ARTICLES OF INCORPORATION

97 JUN -4 PT 12: 09

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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#### ARTICLE I NAME

The name of the corporation shall be:

CARIBBEAN COATINGS CORPORATION

#### ARTICLE II PRINCIPAL OFFICE

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

P. C. Pox 1236 306 Yacht Club Way, Moore Haven, FL 33471

### ARTICLE III SHARES

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

One million shares

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Barbara D. Ceffner

P. O. Pox 1236

306 Yacht Club Way, Moore Haven, FL 33471

#### ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

F. Thomas Oeffner

P. O. Box 1935, 306 Yacht Club Way

Moore Hayen, Ft 33471

(An additional article must be added if an effective date is requested.)

llaving 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/Registered/agent

My 3/1997