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TRANSMITTAL LETTER FILED

97 JUL -1 PM 12:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SPRING COAST INC.

SUBJECT:

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: MABEL S. VICKERS

Name (Printed or typed)

4745 NW. 115TH TERRACE

Address

CORAL SPRINGS, FLORIDA 33076

City, State & Zip

(954) 796-9974

Daytime Telephone number

900002228369--2

-07/01/97--01104--002

*****78.75 *****78.75

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

OK
7/2/97

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 I NAME

The name of the corporation shall be:

SPRING COAST INC.

ARTICLE II PRINCIPAL OFFICE

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

4745 NW 115TH TERRACE
CORAL SPRINGS, FLORIDA 33076

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MABEL S. VICKERS
4745 NW. 115TH TERRACE
CORAL SPRINGS, FLORIDA 33076

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

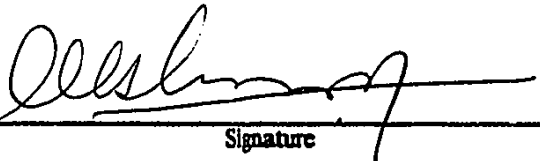
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MABEL S. VICKERS
4745 NW. 115TH TERRACE
CORAL SPRINGS, FLORIDA 33076

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

27 day of JUNE, 19 97.

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



Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

SPRING COAST INC.

1. The name of the corporation is:

2. The name and address of the registered agent and office is:

MABEL S. VICKERS

(NAME)

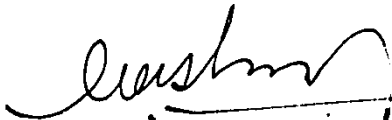
4745 NW. 115TH TERRACE

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

CORAL SPRINGS, FLORIDA 33076

(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)

JUNE 27, 1997

(DATE)

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