

P98000053439

TRANSMITTAL LETTER

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

700002548397--8
-06/05/98-01019-002
*****78.75 *****78.75

SUBJECT: EMERALD COAST Consolidated Enterprises, Inc.

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 & Certi-
ficate

FROM:

Patricia Mayers
6901 N. Lagoon Dr., #32
Panama City Beach, FL 32409
850/230-3558

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 JUN 15 PM 3:46

FILED

UB
6/8/98
5



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 8, 1998

PATRICIA MAYERS
6901 NO. LAGOON DR., #32
PANAMA CITY BEACH, FL 32408

SUBJECT: EMERALD COAST ENTERPRISES, INC.
Ref. Number: W98000013054

We have received your document for EMERALD COAST ENTERPRISES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6930.

Carolyn Batten
Document Specialist

Letter Number: 698A00032089

ARTICLES OF INCORPORATION
OF

Emerald Coast *CONSOLIDATED ENTERPRISES, INC.*

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: EMERALD COAST
CONSOLIDATED ENTERPRISES, INC.

ARTICLE II: PRINCIPAL OFFICE

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

6901 N. Lagoon Drive, #32, Panama City Beach, FL 32408

ARTICLE III: CAPITAL STOCK

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 ADDRESS

The name and address of the initial registered agent is:

Patricia Mayers
6901 N. Lagoon Dr., #32
Panama City Bch., FL 32408

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V: INCORPORATOR(S)

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

William J. Mayers, President
6901 N. Lagoon Dr., #32
Panama City Bch, FL 32408

Patricia Mayers, Secretary/Treasurer
6901 N. Lagoon Dr., #32
Panama City Bch, FL 32408

The undersigned has (have) executed these Articles of incorporation this
3rd day of June, 1998.

William Mayers, Pres.
Signature/Title

Patricia Mayers, Sec./Treas.
Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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TALLAHASSEE, FLORIDA

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.

1. The name of the CORPORATION is: **EMERALD COAST CONSOLIDATED ENTERPRISES, INC.**

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

Patricia Mayers
6901 N. Lagoon Dr., #32
Panama City Beach, FL 32408

William Mayers
Corporate officer

President
Title

6/3/98
Date

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 Patricia Mayers

DATE 6/3/98