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SECRETARY OF STATE AND A SECRETARY OF STATE

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## TRANSMITTAL LETTER

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

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

\$\begin{align\*} \text{ST0.00} \text{ST8.75} & \text{ST0.00} \text{ST8.75} & \text{Filing Fee} & \text{Certified Copy} & \text{Certificate of Status} & \text{ADDITIONAL COPY REQUIRED}

FROM:

GENNARO VINCENT CONTE

10329 GRAPEFRUIT DRIVE

PORT RICHEY FL 34668-3112

(727) 863-0445 Daytime Telephone number

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

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: GENNARO VINCENT CONTE, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 10329 GRAPEFRUIT DRIVE PORT RICHEY, FL 34668-3112

ARTICLE III

The purpose for which the corporation is organized is: REAL ESTATE INSTRUCTION

SHARES

The number of shares of stock is:

100 SHARES OF COMMON STOCK, W/PAR VALUE OF \$1.00 P/SHARE

INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

PRESIDENT GENNARO VINCENT CONTE 10329 GRAPEFRISIT DRIVE PORT RICHEY, FL 34668-3112

ARTICLE VI

REGISTERED AGENT

The name and Florida street address of the registered agent is:

GENNARO VINGENT CONTE POIZT RICHEY, FL 34668-3112

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: GENNARO VINCENT CONTE

10329 GRAPEFRUIT DRIVE PORT RICHEY, FL

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

mnos Signature/Registered Agent

Signature/Incorporator