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TALLAHASSEE, FLORIDA  
CORPORATIONS

204-41137  
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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Villa Natali, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Anthony Quattrochi

(Name of Person)

Villa Natali, Inc.

(Firm/Company)

19431 Little Lane

(Address)

Alva, FL 33920

(City/State and Zip code)

For further information concerning this matter, please call:

Julie W. Mathis CPA at (239) 482-3535

(Name of Person)

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

2004 DEC -6 AM 8:29  
F I L E  
CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

November 9, 2004

ANTHONY QUATTROCHI  
VILLA NATALI, INC.  
19431 LITTLE LANE  
ALVA, FL 33920

SUBJECT: VILLA NATALI, INC.  
Ref. Number: W04000041137

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for VILLA NATALI, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 404A00064032

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

**VILLA NATALI, INC.**

Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"INC.," "CO.," "CORP.," "INC.," "CO.," or "CORP."

If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

1. **NEVADA** 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. **1-03-03** 5. **PERPETUAL**  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

**UPON QUALIFICATION**

State first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification."  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

6. **19431 LITTLE LANE, ALVA, FL 33920**  
(Principal office address)

7. **19431 LITTLE LANE, ALVA, FL 33920**  
(Current mailing address)

8. **SERVICE**  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box NOT acceptable)

Name: **ANTHONY QUATTROCHI**

10. **e Address: 19431 LITTLE LANE**

**ALVA**, Florida **33920**  
(City) (Zip code)

11. **Registered agent's acceptance:**

*I, **Anthony A. Quattrochi**, being named as registered agent and to accept service of process for the above stated corporation at the place  
named in this application, 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 relative to the proper and complete performance of my duties,  
and I am familiar with and accept the obligations of my position as registered agent.*

*Anthony A. Quattrochi*  
(Registered agent's signature)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to  
the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction  
of the law of which it is incorporated.

13. **Names and business addresses of officers and/or directors:**

**DIRECTORS**

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Director: **NATALI QUATTROCHI**

Address: **19681 SUMMERLIN RD. LOT 212J**

**FORT MYERS, FL 33908**

Director: **ANTHONY QUATTROCHI**

Address: **19431 LITTLE LANE**

**ALVA, FL 33920**

**OFFICERS**

President: **STEPHANIE QUATTROCHI**

Address: **19431 LITTLE LANE**

**ALVA, FL 33920**

Vice President: **ANTHONY QUATTROCHI**

Address: **19431 LITTLE LANE**

**ALVA, FL 33920**

Secretary: **ANTHONY QUATTROCHI**

Address: **19431 LITTLE LANE, ALVA, FL 33920**

Treasurer: **ANTHONY QUATTROCHI**

Address: **19431 LITTLE LANE, ALVA, FL 33920**

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

3. Stephanie Quattrochi President  
(Signature of Director or Officer listed in number 12 of the application)

4. **ANTHONY QUATTROCHI**  
(Typed or printed name and capacity of person signing application)

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2004 DEC -6 AM 8:29  
TALLAHASSEE, FLORIDA

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **VILLA NATALI, INC.**, as a close corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since November 3, 2003, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on October 28, 2004.



*Dean Heller*

DEAN HELLER  
Secretary of State

By *Joan Carson*  
Certification Clerk

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