

F12000000/698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

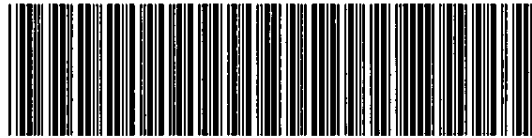
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700229828087

04/19/12--01025--015 \*\*78.75

MRS 4/20/12

FILED  
12 APR 19 PM 1:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** GIL GERALD & ASSOCIATES, 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," or "Certificate of Good Standing" 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:

GILBERTO GERALD  
Name of Person  
GIL GERALD & ASSOCIATES, Inc.  
Firm/Company  
582 MARKET STREET, SUITE 907  
Address  
SAN FRANCISCO, CA 94104  
City/State and Zip code  
GILGERALD@GILGERALD.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GIL GERALD at (415) 627-9139  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing 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

**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.

1. GIL GERALD & ASSOCIATES, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

GIL GERALD, INC.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CALIFORNIA 3. 95-4428500  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2/24/1993 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NONE TRANSACTED  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 582 MARKET ST. SUITE 907, SAN FRANCISCO, CA 94104  
(Principal office address)

582 MARKET ST. SUITE 907, SAN FRANCISCO, CA 94104  
(Current mailing address)

8. CONSULTING WITH PUBLIC & PRIVATE ORGS.  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

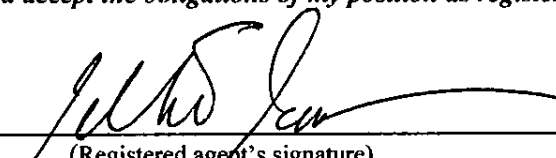
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: GILBERTO GERALD

Office Address: 8250 BYRON AVE #501  
MIAMI BEACH, Florida 33141  
(City) (Zip code)

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

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated 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.

  
(Registered agent's signature)

11. 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 under the law of which it is incorporated.

**FILED**  
12 APR 19 PM 1:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: NORM NICKENS

Address: 1646 FLORIDA ST.  
SAN FRANCISCO, CA 94110

FILED

12 APR 19 PM 1:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Vice Chairman: \_\_\_\_\_

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

Director: GILBERTO GERALD

Address: 8250 BYRON AVE. #501  
MIAMI BEACH, FL 33141

Director: JEFFREY VESSELS

Address: 8250 BYRON AVE. #501  
MIAMI BEACH, FL 33141

B. OFFICERS

President: GILBERTO GERALD

Address: 8250 BYRON AVE. #501  
MIAMI BEACH, FL 33141

Vice President: \_\_\_\_\_

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

Secretary: ~~GILBERTO GERALD~~ NORM NICKENS

Address: 1646 FLORIDA ST, SAN FRANCISCO, CA 94110

Treasurer: GILBERTO GERALD

Address: 8250 BYRON AVE. #501, MIAMI BEACH, FL 33141

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

13. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. GILBERTO GERALD

(Typed or printed name and capacity of person signing application)

**FILED**

12 APR 19 PM 1:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

First Name	Last Name	Position	Street	City	State	Zip
Francee	Covington	Director	409 Oak Street	San Francisco	CA	94102
Paul	Dannhauser	Director	3836 Lyman Rd.	Oakland	CA	94602
James	Terrell	Director	149 Fillmore Street	San Francisco	CA	94117
Jeffrey	Vessels	Director	8250 Byron Ave., #501	Miami Beach	FL	33141

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**FILED**

**12 APR 19 PM 1:04**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**ENTITY NAME:**

**GIL GERALD & ASSOCIATES, INC.**

**FILE NUMBER: C1854243**  
**FORMATION DATE: 02/24/1993**  
**TYPE: DOMESTIC CORPORATION**  
**JURISDICTION: CALIFORNIA**  
**STATUS: ACTIVE (GOOD STANDING)**

I, DEBRA BOWEN, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of March 23, 2012.

*Debra Bowen*

**DEBRA BOWEN**  
**Secretary of State**