

F24000003872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

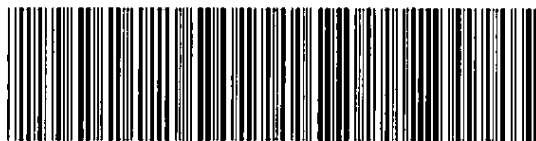
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W24-92276

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JUN 10 2024

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
24 JUL 22 PM 3:54



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2024

KATE GOMES
422 LARKFIELD CENTER, UNIT 469
SANTA ROSA, CA 95403 US

SUBJECT: KATE GOMES REAL ESTATE, INC.
Ref. Number: W24000092276

We have received your document for KATE GOMES REAL ESTATE, INC. and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones
Regulatory Specialist II

Letter Number: 424A00013218

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. Kate Gomes Real Estate, 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)

2. California 3. 87-1334968
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/25/2021 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 422 Larkfield Center, Unit 469, Santa Rosa, California 95403
(Principal office street address)

(Current mailing address, if different)

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

Name: Kate Gomes

Office Address: 870 North Miramar Avenue, Unit 833

Indianlantic, Florida 32903
(City) (Zip code)

9. 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.

DocuSigned by:

Kate Rachel Gomes

4C0F4748B0C5436

(Registered agent's signature)

10. 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
24 JUL 22 PM 3:54

A. DIRECTORS

☐ Chairman Name: Kate Rachel Gomes

☐ Vice Chairman Address: _____

☒ Director 422 Larkfield Center, Unit 469

☒ President Santa Rosa, California 95403

☐ Vice President _____

☒ Secretary ☒ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Jamie Gomes

☐ Vice Chairman Address: _____

☒ Director 422 Larkfield Center, Unit 469

☐ President Santa Rosa, California 95403

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Mathias Gilbert

☐ Vice Chairman Address: _____

☒ Director 422 Larkfield Center, Unit 469

☐ President Santa Rosa, California 95403

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Jonah Gomes

☐ Vice Chairman Address: _____

☒ Director 422 Larkfield Center, Unit 469

☐ President Santa Rosa, California 95403

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Lori Patterson

☐ Vice Chairman Address: _____

☒ Director 422 Larkfield Center, Unit 469

☐ President Santa Rosa, California 95403

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

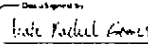
☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12  _____
DocuSigned by:
 Kate Rachel Gomes
 8721046304

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: KATE GOMES REAL ESTATE, INC.
Entity No.: 4744496
Registration Date: 05/25/2021
Entity Type: Stock Corporation - CA - General
Formed In: CALIFORNIA
Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, 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 May 30, 2024.

SHIRLEY N. WEBER, PH.D.
Secretary of State