

704000139785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

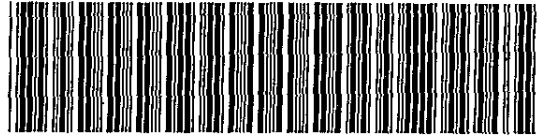
(Business Entity Name)

(Document Number)

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

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10/08/04--01030--001 \*\*78.75

CLERK OF STATE  
TALLAHASSEE, FLORIDA

OCT-8 PM 1:43

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LAW OFFICES  
**WILLIAM E. SHOCKETT, P.A.**  
25 WEST FLAGLER STREET  
SUITE 711  
MIAMI, FLORIDA 33130  
(305) 577-7295

October 7, 2004

Department of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

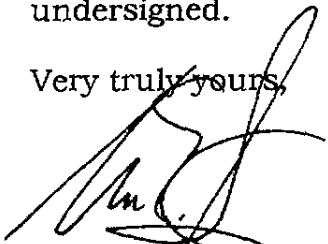
Re: Gateway Townhouse, Inc.

Gentlemen:

Enclosed are an original and one copy of the Articles of Incorporation and a check in the sum of \$78.75 for the filing fee and a Certificate of Status.

Please send the file copy of the Articles and Certificate of Status to the undersigned.

Very truly yours,



William E. Shockett  
WES/me  
Enclosure  
C:CORRESP:GATEWAY-1

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**ARTICLES OF INCORPORATION OF**  
**GATEWAY TOWNHOUSE, INC.**

**ARTICLE I**  
**NAME**

The name of the corporation shall be GATEWAY TOWNHOUSE, INC.

**ARTICLE II**  
**PRINCIPAL OFFICE**

The principal place of business and mailing address is 279 North Hibiscus Drive, Miami Beach, Florida 33139.

**ARTICLE III**  
**PURPOSE**

This corporation is organized for the purpose of transacting any and all lawful business.

**ARTICLE IV**  
**SHARES**

The number of shares of capital stock that the corporation is authorized to issue is one hundred (100) shares.

**ARTICLE IV**  
**INITIAL DIRECTORS**

The Corporation shall have one (1) director initially. The name and address of the director is as follows:

JAMES SILVERS	279 North Hibiscus Drive
	Miami Beach, Florida 33130

**ARTICLE VI**  
**REGISTERED AGENT**

The name and Florida street address of the Registered Agent is as follows:

JAMES SILVERS	279 North Hibiscus Drive
	Miami Beach, Florida 33130

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**ARTICLE VII**  
**INCORPORATOR**

The name and address of the Incorporator is as follows:

JAMES SILVERS

279 North Hibiscus Drive  
Miami Beach, Florida 33130

**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.**

  
\_\_\_\_\_  
JAMES SILVERS, Registered Agent

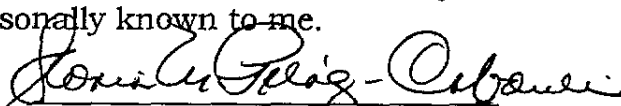
Date: October 7, 2004

  
\_\_\_\_\_  
JAMES SILVERS, Incorporator

Date: October 7, 2004

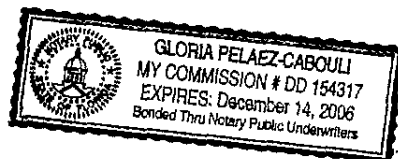
STATE OF FLORIDA  
COUNTY OF DADE

The foregoing instrument was acknowledged before me this 7<sup>th</sup> day of  
October, 2004, by JAMES SILVERS, who is personally known to me.

  
\_\_\_\_\_  
Notary Public, State of Florida

My commission expires:

C:GATEWAY:ARTICLES-INC



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TALLAHASSEE, FLORIDA