

P04000139889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

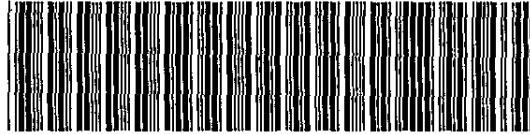
(Business Entity Name)

(Document Number)

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

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04 OCT -8 PM 3:54

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

TA 10/8/04

## TRANSMITTAL LETTER

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

SUBJECT: \_\_\_\_\_

GARY CACCAVIELLO, PA

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☒ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: \_\_\_\_\_

GARY CACCAVIELLO

Name (Printed or typed)

1004 PINE DR UNIT 105

Address

POMPAUNO BEACH, FL 33060

City, State & Zip

954-684-5513

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)

**ARTICLE I NAME**

The name of the corporation shall be: Gary Caccaviello, PA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: 1004 Pine DR #105  
POMPANO BEACH, FL 33060

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: REALTOR/Mortgage Broker

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Gary Caccaviello OWNER/Pres.  
1004 Pine DR UNIT 105  
POMPANO BEACH, FLA 33060

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Gary Caccaviello OWNER/Pres.  
1004 Pine DR UNIT 105  
POMPANO BEACH, FLA 33060

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Gary Caccaviello OWNER/Pres.  
1004 Pine DR UNIT 105  
POMPANO BEACH, FLA 33060

\*\*\*\*\*

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

Signature/Registered Agent

Signature/Incorporator

Date

Date

FILED  
04 OCT - 8 PM 3:54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA