

P/2000077493

(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



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08/27/12--01008--013 **70.00

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12 AUG 10 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WD-44830

MD 9/12

COVER LETTER

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

SUBJECT: GAVY & Associates, Inc.
(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

| | |
|--|---|
| <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| ADDITIONAL COPY REQUIRED | |

FROM: Julio S. Pita
Name (Printed or typed)

1405 Sorolla Avenue
Address

Coral Gables, Fl. 33134
City, State & Zip

786-236-8344
Daytime Telephone number

juliopita@bellsouth.net
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 29, 2012

JULIO S. PITA
1405 SOROLLA AVENUE
CORAL GABLES, FL 33134

SUBJECT: GAVY & ASSOCIATES, INC.
Ref. Number: W12000044830

We have received your document for GAVY & ASSOCIATES, 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 registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of 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) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 612A00022038

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: **GAVY & Associates, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1405 Sorolla Avenue
Coral Gables, Fl 33134

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
General Business

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12 AUG 10 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: **Ten**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Julio S. Pita, President**
Address: **1405 Sorolla Avenue**
Coral Gables, Fl 33134

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

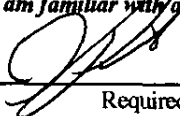
Name: **Julio S. Pita**
Address: **1405 Sorolla Avenue**
Coral Gables, Fl 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Julio S. Pita**
Address: **1405 Sorolla Avenue**
Coral Gables, Fl 33134

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

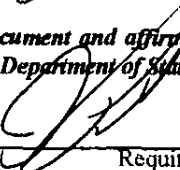


Required Signature/Registered Agent

8/22/2012

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.



Required Signature/Incorporator

8/22/2012

Date