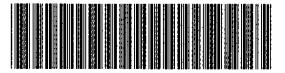
P13000062166

(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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SECRETARY OF STATE
TALLAHASSEE, FLORGE

06/04/13--01018--014 **78.75

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1: Burer JUL 2 6: 2019

COVER LETTER

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

SUBJECT: GA	TOR AL, INC.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 CO	PY REQUIRED
		e (Printed or typed)	
<u>10</u>	091 DEERWOOI		
W	ESTON,FL 3332	Address 26	
	Čity	, State & Zip	
(9	54)850-6611		
	Daytime 7	Telephone number	
G	ATOR09858@AOL	.COM	
- 11 - 1 -	E-mail address: (to be use	ed for future annual report	notification)

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



June 5, 2013

ALAN MATES 1091 DEERWOOD LANE WESTON, FL 33326

SUBJECT: GATOR AL, INC Ref. Number: W13000032734

We have received your document for GATOR AL, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 913A00014175

www.sunbiz.org

District of Community D.O. DOV 0007 Fellows Florida 0001



June 26, 2013

ALAN MATES 1091 DEERWOOD LANE WESTON, FL 33326

SUBJECT: GATOR AL, INC Ref. Number: W13000032734

We have received your document for GATOR AL, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 813A00016014

www.sunbiz.org

DO DOV GOOD M II

Gator Al, Inc. 1091 Deerwood Lane, Weston, FL 33326

July 17, 2013

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

To Whom it May Concern:

SUBJECT: RELEASE OF GATOR AL, INC.

This letter is to serve as official notice that I release the ownership of the name, and any and all ownership rights to the corporation, Gator Al, Inc. (document P03000032243, originally filed March 17, 2003), effective immediately.

Respectfully

alan Motts

Alan Mates

President / Vice President / Secretary / Treasurer / Director

Gator Al, Inc.

STATE OF FLORIDA	
COUNTY OF Browsed	_



But O. Mey (Signature of Notary Public – State of Florida)

(Name of Notary Typed, Printed, or Stamped)

(Notary seal)

Personally Known OR Produced Identification (Type of Identification Provided)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II PRINCIPAL OFFICE Principal street address 1091 DEERWOOD LANE WESTON; FL 33326 ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY AND	Mailing address, if different is:
WESTON, FL 33326	
The number for which the correction is accomised in: ANY AND	
The purpose for which the corporation is organized is:	ALL LAWFULL BUSINESS
	ALLA
	F F S R 23
	E STA
ARTICLE IV SHARES	26 RAPE
The number of shares of stock is:	-
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
	ne and Title:
Address 1091 DEERWOOD LANE Ad	dress:
14/5070NL 51 00000	
<u>WESTON, FL 33326</u>	
Name and Title:Name	ne and Title:
Address Ad	dress:
	·
Name and Title:Name	ne and Title:
Address Ad	dress:

Name a	nd Title:	Name and Title:
Addres	s	Address:
		
ARTICLE VI	REGISTERED AGENT	
The name and F	lorida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	LAYNE VEREBAY	
Address:	7800 W OAKLAND PARK BLVD, B 104	
	SUNRISE, FL 33351	SE SE
ARTICLE VII	INCORPORATOR	FILEC JUL 23 PI CRETARY OF LAHASSEE.
The <u>name and a</u>	ddress of the Incorporator is:	TO THE D
Name:	ALAN MATES	
Address:	1091 DEERWOOD LANE	: 26
	WESTON, FL 33326	
	med as registered agent to accept service of process am familiar with and accept the appointment as regi	
		3-30-10
4	Required Signature/Registered Agent	Date
	current and affirm that the facts stated herein are to Department of State constitutes a third degree felony	rue. I am aware that the false information submitted in a as provided for in s.817.155, F.S.
	Required Signature/Incorporator	1 -0/ -0/3 Date