

PI 4000039949

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

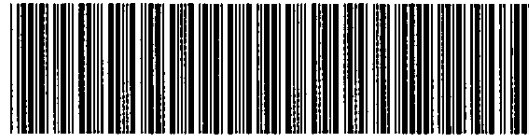
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/02/14--01017--019 **78.75

14 MAY -2 PM 1:02
DIVISION OF CORPORATIONS
SECRETARY OF STATE

COVER LETTER

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

SUBJECT: _____

Alva Gator, 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

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: _____

Steven G. Koeppe

Name (Printed or typed)

1617 Henry St., Ste 205

Address

Fort Myers, FL 33901

City, State & Zip

239-337-4343

Daytime Telephone number

SKREC@Klegal.com

E-mail address: (to be used for future annual report notification)

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: Alva Gator, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1617 Hendry Street
St 205
Fort Myers, FL 33901

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Residential Real Estate

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Steven G. Koepfel Name and Title: President

Address: 1617 Hendry St Address: _____
St 205
Fort Myers FL 33901

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAY - 2 PM 1:02

(cont.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Mark B. Yeslow
Address: 1380 Landmark Court
Fort Myers, FL 33919

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Steven G. Koeppe
Address: 1617 Hendry Street, Ste 205
Fort Myers, FL 33901

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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

Mark Yeslow
Required Signature/Registered Agent

4/30/14
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.

[Signature]
Required Signature/Incorporator

4/30/14
Date