

P14 000056525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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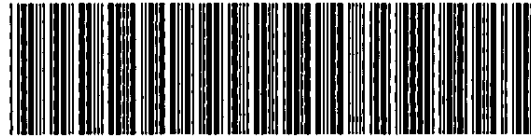
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 JUN 30 PM 2:36

5/10/14

## COVER LETTER

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

SUBJECT: **Precious metalsRetail Corporation**

(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: **Daniel Gatto**

Name (Printed or typed)

**4 cristina dr.**

Address

**manorville ny.11949**

City, State & Zip

**631-521-1510**

Daytime Telephone number

**danigat4@cs.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: precious metals retail corporation

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

4 cristina dr manorville ny.11949

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: retail jewelry business

**ARTICLE IV SHARES**

The number of shares of stock is: 100 par shares

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

Name and Title: daniel gatto president Name and Title: \_\_\_\_\_

Address 4 cristina dr. manorville ny.11949 Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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DIVISION OF CORPORATIONS  
14 JUN 30 PM 2:36

(conti.)

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: Donna brown  
Address: 3414 ambassador ave  
springhill fl.34609

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Daniel gatto  
Address: 4cristina dr.manorville ny.  
11949

*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*

Donna Brown

Required Signature/Registered Agent

6/23/2014

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.*

Daniel Gatto

Required Signature/Incorporator

6/23/2014

Date