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OCT 15 2014
S. GILBERT

COVER LETTER

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

SUBJECT: **MARCO GELPI, P.A.**
(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **MARCO GELPI**
Name (Printed or typed)
4908 WASHINGTON DR
Address
CORAL GABLES, FL, 33133
City, State & Zip
(305)305-0465
Daytime Telephone number
MARCO@MARGOGELPI.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: **MARCO GELPI, P.A.**

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

**4908 WASHINGTON DR
CORAL GABLES, FL, 33133**

Mailing address, if different is:

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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE SALES SERVICES.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **MARCO GELPI - PRESIDENT**

Name and Title: _____

Address **4908 WASHINGTON DR
CORAL GABLES, FL, 33133**

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(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: MARCO GELPI
Address: 4908 WASHINGTON DR
CORAL GABLES, FL, 33133

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARCO GELPI
Address: 4908 WASHINGTON DR
CORAL GABLES, FL, 33133

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

10/09/14

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.



Required Signature/Incorporator

10/09/14

Date