

P15000067330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

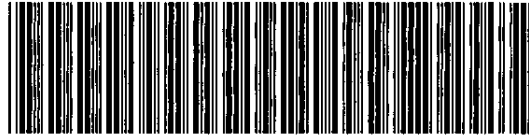
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15 AUG 10 PM 4:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/11/15

COVER LETTER

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

SUBJECT: Gateway Electronics Co.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$0.00
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: Clayton Boyd
Name (Printed or typed)
1518 North West 90th Way
Address
Pembroke Pines, Florida, 33024
City, State & Zip
954-802-2928
Daytime Telephone number
claytonboydf1@yahoo.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 24, 2015

CLAYTON BOYD JR.
1518 NORTH WEST 90TH WAY
PEMBROKE PINES, FL 33024

SUBJECT: GATEWAY ELECTRONICS ENTERPRISE
Ref. Number: W15000046373

RECEIVED AUG 10 2015

We have received your document for GATEWAY ELECTRONICS ENTERPRISE and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 015A00015631

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 10, 2015

CLAYTON BOYD JR.
1518 NORTH WEST 90TH WAY
PEMBROKE PINES, FL 33024

SUBJECT: GATEWAY ELECTRONICS ENTERPRISE
Ref. Number: W15000046373

15 JUL 23 PM 3:02

RECEIVED

We have received your document for GATEWAY ELECTRONICS ENTERPRISE 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 515A00014393

FILED

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

FILED

ARTICLE I NAME

The name of the corporation shall be: Gateway Electronics Co.

15 AUG 10 PM 4:18

ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1518 North West 90th Way

Pembroke Pines, FL, 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: profit

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Clayton Boyd

Name and Title: _____

Address 1518 North West 90th Way

Address: _____

Pembroke Pines, FL, 33024

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Clayton Boyd

Address: 1518 North West 90th Way

Pembroke Pines, FL, 33024

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Clayton Boyd

Address: 1518 North West 90th Way

Pembroke Pines, FL, 33024

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Clayton Boyd Jr.

Required Signature/Registered Agent

7-20-15

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.

Clayton Boyd Jr.

Required Signature/Incorporator

7-20-15

Date