

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BOND, SCHOENECK & KING, PLLC
Account Number : I20010000122
Phone : (239) 659-3800
Fax Number : (239) 659-3812

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: Anthony.gatto@sothebysrealty.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Anthony J. Gatto, P.A.

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$78.75

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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: Anthony J. Gatto, P.A.

ARTICLE II PRINCIPAL OFFICEPrincipal ~~street~~ address

Mailing address, if different is:

24410 Reserve Court, Unit 101

Same

Bonita Springs, FL 34134

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anthony J. Gatto, President

Name and Title:

Address: 24410 Reserve Court, Unit 101

Address:

Bonita Springs, FL 34134

Name and Title: Anthony J. Gatto, Treasurer

Name and Title:

Address: 24410 Reserve Court, Unit 101

Address:

Bonita Springs, FL 34134

Name and Title: Anthony J. Gatto, Secretary

Name and Title:

Address: 24410 Reserve Court, Unit 101

Address:

Bonita Springs, FL 34134

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: James Morey, Bond, Schoeneck and King, PLLC
Address: 4001 Tamiami Trail North, Suite 250
Naples, FL 34103

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Pamela Lundborg
Address: 4001 Tamiami Trail North, Suite 250
Naples, FL 34103

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



Required Signature/Registered Agent

9-30-15

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.



Required Signature/Incorporator

9-30-15

Date

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