

P18000102220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

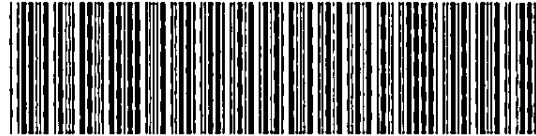
Special Instructions to Filing Officer:

Office Use Only

W18000104867

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RECEIVED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 5, 2018

ALAN GABAY
92 SW 3RD ST #4605
MIAMI, FL 33130

SUBJECT: ALAN GABAY P.A.
Ref. Number: W18000104867

We have received your document for ALAN GABAY P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 318A00024909

Alan Gabay
92 SW 3rd St # 4065
Miami, FL 33130

alangabay@gmail.com
305.968.6416

December 15, 2018

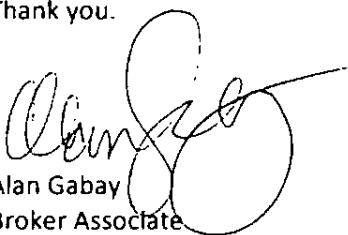
Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314
ATTN: Tyron Scott

RE: Document Number W18000104867

Dear Mr. Scott,

I sent out a package yesterday but neglected to include all the copies you needed. In this package is everything you asked for to complete the paperwork on my new entity.

Thank you.


Alan Gabay
Broker Associate

COVER LETTER

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

SUBJECT: ALAN GABAY 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 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: ALAN GABAY

Name (Printed or typed)

92 SW 3RD ST # 4605

Address

MIAMI, FL 33130

City, State & Zip

305-968-6416

Daytime Telephone number

ALANGABAY@GMAIL.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: ALAN GABAY P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
92 SW 3RD ST # 4605 MIAMI, FL 33130

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

I AM A FLORIDA REAL ESTATE BROKER ASSOCIATE AND I NEED TO SET MYSELF UP AS A P.A.

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ALAN GABAY - PRESIDENT

Name and Title:

Address: 92 SW 3RD ST # 4605

Address:

MIAMI, FL 33130

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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FILED
CLERK OF DISTRICT COURT
MIAMI, FLORIDA

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: ALAN GABAY
Address: 92 SW 3RD ST # 4605
MIAMI, FL 33130

ARTICLE VII INCORPORATOR

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

Name: ALAN GABAY
Address: 92 SW 3RD ST # 4605
MIAMI, FL 33130

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 days prior or 90 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
11/26/18
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
11/26/18
Date