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(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:					
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Office Use Only



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TATISSSEE FLORIDA

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COVER LETTER

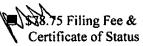
TO: New Filing Section Division of Corporations
SUBJECT: Gator Realty & Leasing Inc.
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Scott M Colby
Name of Person
Gator Realty & Leasing Inc.
Firm/Company
8617 Buttercup Dr.
Address
East Amherst NY 14051
City/State and Zip code
theboys28ny@yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Scott Colby at (716) 741-1252 Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Enclosed is a check for the following amount:





□ \$78.75 Filing Fee & Certified Copy

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

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of co	alty & Leasing, Fwo orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"			
Gator Re	ealty Inc.				
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in	ı Florida)		
_{2.} New Yorl	Κ ,	, 46-1611605			
	under the law of which it is incorporated)	(FEI number, if applicable)		2	
4. 12/19/20	12	_s perpetual			
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "pe	rpetual")		
_{6.} 01/04/20	13				
	(Date first transacted business i	in Florida, if prior to registration) 502, F.S., to determine penalty liability)			
, 8617 Butt	ercup Dr. East Amherst N				
·	(Principal office add				
8617 Butte	ercup Dr. East Amherst NY	14051			
	(Current mailing add	dress)			
_{8.} Purchase	and Sale of Houses		520-	_ <u>_</u>	
(Purpose(s) of corporation authorized in home state or c	ountry to be carried out in state of Florida)	<u> </u>) FEB	
9. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)			7
Name:	Scott Colby			7	
Office Address:	4912 Pelican Blvd		SIA SIA	-7 AMII: Lo	-
	Cape Coral	, Florida 33990	Su ?	0	
	(City)	(Zip code)			

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

^{11.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: Address: _____ Director: Address: ___ Director: Address: ____ **B. OFFICERS** President: Scott M Colby Address: 8617 Buttercup Dr East Amherst NY 14051 Vice President: Address: Secretary: __ Address: _ Treasurer: Address: ____ NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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. 14. Scott M Colby President

N. Y. S. DEPARTMENT OF STATE DIVISION OF CORPORATIONS AND STATE RECORDS

ALBANY, NY 12231-0001

FILING RECEIPT

ENTITY NAME: GATOR REALTY & LEASING, INC.

DOCUMENT TYPE: INCORPORATION (DOM. BUSINESS)

FILED:12/19/2012 DURATION:PERPETUAL CASH#:121219000431 FILM #:121219000388

DOS ID:4335076

FILER:

KADISH & FIORDALISO 3517 GENESEE ST.

EXIST DATE 12/19/2012

COUNTY: ERIE

BUFFALO, NY 14225

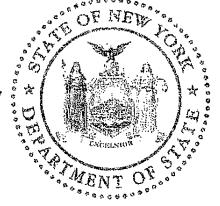
ADDRESS FOR PROCESS:

THE CORPORATION 8617 BUTTERCUP DRIVE EAST AMHERST, NY 14051

REGISTERED AGENT:

STOCK:

200 NPV



13 FEB -7 AM ||: 49
SECRETASY OF STATE
TALL AMASSEE FLORIDA

The corporation is required to file a Biennial Statement with the Department of State every two years pursuant to Business Corporation Law Section 408. Notification that the biennial statement is due will only be made via email. Please go to www.email.ebiennial.dos.ny.gov to provide an email address to receive an email notification when the Biennial Statement is due.

SERVICE COMPANY: CORPORATION SERVICE COMPANY - 45 SERVICE CODE: 45 *

FEES	195.00	PAYMENTS	195.00				
FILING	125.00	CASH	0.00				
TAX	10.00	CHECK	0.00				
CERT	0.00	CHARGE	0.00				
COPIES	10.00	DRAWDOWN	195.00				
HANDLING	50.00	OPAL	0.00				
		REFUND	0.00				

463741AJC

DOS-1025 (04/2007)