

W20000005437

(Requestor's Name)

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(Business Entity Name)

(Document Number)

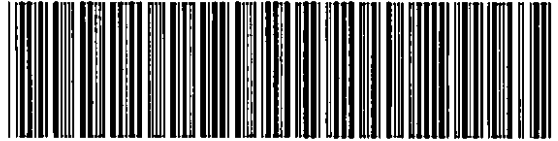
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2020 MAY 20 AM 4:45
ST. LOUIS, MO
FALL MISSOURI, MO



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2020

MAURICE LECOINTE
PO BOX 640768
MIAMI, FL 33164

SUBJECT: PC SCAVENGERS, INC.
Ref. Number: W20000048585

We have received your document for PC SCAVENGERS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

PLEASE COMPLETE PRINCIPAL ADDRESS.

Please return 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.

Keyna E Page
Regulatory Specialist II

Letter Number: 420A00010027

2020 MAY 20 PM 12:07

COVER LETTER

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

SUBJECT: PC Scavengers, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: Maurice LeCointe

Name (Printed or typed)

PO Box 640768

Address

Miami, FL 33164

City, State & Zip

305-303-9542

Daytime Telephone number

mlecointe@pcscavengers.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 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: PC Scavengers, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
650 SW 108th Ave Unit# 207, Pembroke Pines, FL 33025

Mailing address, if different is:
PO Box 640768, Miami, FL, 33164

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide refurbished computers to various non-profit and charitable organizations within the community thru various ink toner and electronics recycling programs.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Directors/Officers w

& Directors/Officers will be elected

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maurice LeCointe, President

Address: PO Box 640768
Miami, FL 33164

Name and Title: Lawanda LeCointe, Vice President

Address: PO Box 650768
Miami, FL 33164

Name and Title: Shirley Harvey Gooden, Secretary

Address: PO Box 640768
Miami, FL 33164

Name and Title: Shaneika Harvey, Treasurer

Address: PO Box 640768
Miami, FL 33164

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2020 MAY 20 AM 4:45
FILED
SECRETARY OF STATE
FLORIDA

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: Maurice LeCointe
 Address: 650 SW 108th Ave #202
Pembroke Pines, FL 33025

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 2020 MAY 20 AM 4:45
 SEATTLE COUNTY CLERK
 TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Maurice LeCointe
 Address: PO Box 640768
Miami, FL 33164

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 of Registered Agent

5/14/20
 Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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 of Incorporator

5/14/20
 Date