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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Logikal Inc.
(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: Ligea M. Jones
Name (Printed or typed)

309 NE 16th Street Unit C1
Address

FORT Lauderdale, FL 33304
City, State & Zip

(954) 383-6079
Daytime Telephone number

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

Logikal, Inc.
C/O Ligea M. Jones
309 NE 16th Street, Unit C1
Fort Lauderdale, Florida 33304

Date

**Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314**

Re: Articles of Incorporation

Dear Sir:

Enclosed please find an original and one copy of Articles of Incorporation along with the filing fee of \$87.50. Please file and provide a certified copy and Certificate of Status to me, together with any other information you commonly provide to new incorporators at the address above.

Please contact me at the above address if you require anything further.

Sincerely yours,

Enclosures
Check Enclosed

**ARTICLES OF INCORPORATION
FLORIDA STOCK CORPORATION**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

In compliance with Chapter 607 and/or Chapter 621, F.S., the undersigned would state:

ARTICLE I NAME

The name of the corporation shall be:

Logikal, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Logikal, Inc.
309 NE 16th Street , Unit C1
Fort Lauderdale, Florida, Florida 33304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Call center helpline support, and any other commercial venture allowable under Florida statute.

ARTICLE IV SHARES

The number of shares the corporation is authorized to issue is:

Number of shares authorized	Class	Par Value
100000000	Common	\$0.00001

ARTICLE V INITIAL OFFICERS/DIRECTORS

The names and address of the initial officers and directors are:

Ligea M. Jones

Chairman/President/Director
309 NE 16th Street, Unit C1
Fort Lauderdale, FL 33304

Lois Kirby

Vice President/Treasurer/
Secretary/Director
309 NE 16th Street, Unit C1
Fort Lauderdale, FL 33304

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

Ligea M. Jones
309 NE 16th Street, Unit C1
Fort Lauderdale, Florida 33304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Ligea M. Jones
309 NE 16th Street, Unit C1
Fort Lauderdale, Florida 33304

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Ligia M. Jones
Signature/Registered Agent

Date: 04/06/04

Ligia M. Jones
Signature/Incorporator

Date: 04/06/04

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TALLAHASSEE, FLORIDA