

P10000028095

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

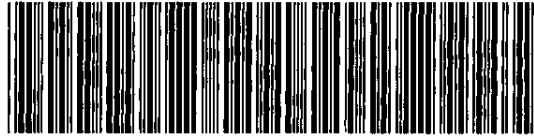
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400173426494

03/30/10--01020--013 \*\*87.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 MAR 30 PM 1:15

APPROVED  
AND  
FILED

## COVER LETTER

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

SUBJECT: Metad West Computer Repair 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: Maria Tamez De Leyva  
Name (Printed or typed)

7224 W Colonial Dr.  
Address

Orlando, Florida 32818  
City, State & Zip

407-381-9851  
Daytime Telephone number

Mig38@yahoo.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)

APPROVED  
AND  
FILED

## ARTICLE I NAME

The name of the corporation shall be:

Metro West Computer Repair, INC.

10 MAR 30 PM 1:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

7224 W Colonial Dr.  
Orlando, Florida 32818

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ~~the general purpose of this Corporation~~  
shall be the Transaction of any and all lawful ~~business~~.

Computer Repair, Service and Retail

## ARTICLE IV SHARES

The number of shares of stock is:

750,000.

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): ~~the office of this Corporation shall be at~~  
7224 W Colonial Dr. Orlando, Florida. ~~the initial Registered Agent of the~~  
Corporation at the address shall be Maria Tamez De Leyva, ~~the Corporation may~~  
change its Registered Agent or Location or Both without Amendment of these Articles of  
Incorporation.

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Maria Tamez De Leyva  
3829 Pickwick Dr.  
Orlando, Florida 32817

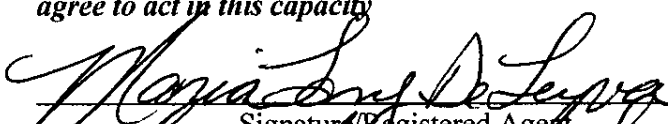
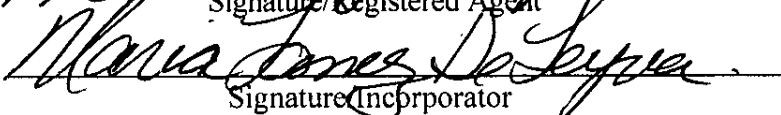
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Maria Tamez De Leyva  
3829 Pickwick Dr.  
Orlando, Florida 32817

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

03/25/10  
\_\_\_\_\_  
Date  
03/25/10  
\_\_\_\_\_  
Date