

PI10000056006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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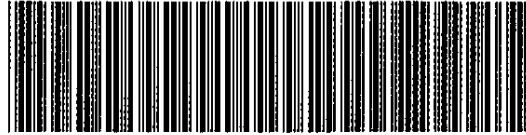
(Business Entity Name)

(Document Number)

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

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2011 JUN 14 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SC  
6-15-11

## COVER LETTER

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

SUBJECT: H.O.M.E. COMPUTERS, 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: BARRY HOWARD

Name (Printed or typed)

14671 BONAIRE BLVD. SUITE 208

Address

DELRAY BEACH, FL 33446

City, State & Zip

561-637-6832

Daytime Telephone number

BHOWARD825@AOL.COM

E-mail address: (to be used for future annual report notification)

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

SECRETARY OF  
STATE  
TALLAHASSEE, FL 32314

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**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** H.O.M.E. Computers, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
14671 Bonaire Blvd, Suite 208  
Delray Beach, FL 33446

Mailing address, if different is:

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
Computer repair and any other legal purpose related to home computers.

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Barry Howard, President	Name and Title: _____
Address: 14671 Bonaire Blvd, Suite 208	Address: _____
Delray Beach, FL 33446	_____
_____	_____
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: Barry Howard  
Address: 14671 Bonaire Blvd, Suite 208  
Delray Beach, FL 33446

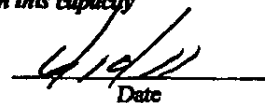
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Barry Howard  
Address: 14671 Bonaire Blvd, Suite 208  
Delray Beach, FL 33446

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

  
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.817.153, F.S.

  
Required Signature/Incorporator

  
Date

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