

P11000096847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

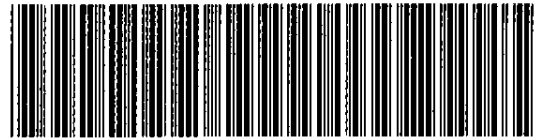
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/21/11--01001--018 **78.75

W11-54367

FILED
2011 NOV -7 PM 4:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 NOV 8 2011

COVER LETTER

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

SUBJECT: GoDigi Sign@true Advertising, Corp.
(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: Leivy P. Garcia
Name (Printed or typed)

5305 SW 64th Avenue
Address

Miami, FL 33155
City, State & Zip

786.333.5652
Daytime Telephone number

godigi@gmail.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 NOV -7 PM 2:21

DIVISION OF CORPORATIONS

October 24, 2011

LEIVY P. GARCIA
5305 SW 64TH AVE
MIAMI, FL 33155

SUBJECT: GODIGI SIGN@TRUE ADVERTISING, CORP.
Ref. Number: W11000054367

We have received your document for GODIGI SIGN@TRUE ADVERTISING, CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 311A00024268

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

ARTICLE I NAME GoDigi Sign@true Advertising, Corp.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
5305 SW 64th Avenue
Miami, Florida 33155

Mailing address, if different is:
P.O. Box 430767
South Miami, Florida 33243

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To offer commercial signs & advertising services to independent business owners and professionals.

ARTICLE IV SHARES

The number of shares of stock is: 10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Leivy P. Garcia, President
Address: 5305 SW 64th Avenue
Miami, FL 33155

Name and Title: Jesus Garcia, Vice President
Address: 5305 SW 64th Avenue
Miami, FL 33155

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Leivy P. Garcia
Address: 5305 SW 64th Avenue
Miami, FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Leivy P. Garcia
Address: 5305 SW 64th Avenue
Miami, FL 33155

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

11/3/11
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.817.155, F.S.



Required Signature/Incorporator

11/3/11
Date

FILED

2011 NOV - 7 PM 4: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA