

P12000035667

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

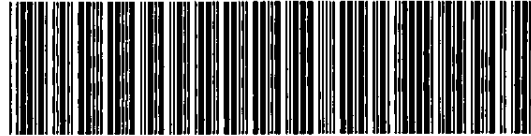
(Document Number)

Certified Copies _____ Certificates of Status _____

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W12000018870



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12 APR 12 PM 3:17

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

4/16/12

COVER LETTER

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

SUBJECT: Liberty City Computer Workshop
(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: Geraldine Jones
Name (Printed or typed)
1524 NW 64th Street
Address
Miami, FL 33147
City, State & Zip
786-247-4627
Daytime Telephone number
geraldinejns@gmail.com
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 APR 12 PM 3:17

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



RECEIVED
12 APR 12 AM 10:47

FLORIDA DEPARTMENT OF STATE
Division of Corporations
TALLAHASSEE, FLORIDA

April 4, 2012

GERALDINE JONES
1524 NW 64TH STREET
MIAMI, FL 33147

SUBJECT: LIBERTY CITY COMPUTER WORKSHOP
Ref. Number: W12000018870

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

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 412A00011020

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Liberty City Computer Workshop Inc.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE II PRINCIPAL OFFICE

Principal street address

1524 NW 64th Street
MIAMI, FL 33147-7938

Mailing address, if different is:

12 APR 12 PM 3:17

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: inc

Liberty City Computer Workshop is a Home-Base PC Repair and PC Tutorial business. At the computer workshop customers will be able to get their computers serviced at a reasonable price. Technical support will be provided via telephone or at their location. Hard drives will be wiped for PC disposal or re-use. Resolved technical issues such as internet connectivity, virus removal, hardware and software malfunctions will be able. Liberty City Workshop will help customers to service their own computers.

ARTICLE IV SHARES

The number of shares of stock is: 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Geraldine Jones - President

Address: 1524 NW 64th Street
Miami, FL 33147-7938

Name and Title: _____

Address: _____

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: Geraldine Jones

Address: 1524 NW 64th Street
Miami, FL 33147-7938

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Geraldine Jones

Address: 1524 NW 64th Street
Miami, FL 33147-7938

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

Geraldine Jones

Required Signature/Registered Agent

03-26-2012

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.

Geraldine Jones

Required Signature/Incorporator

03-26-2012

Date