

P 13000021023

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 MAR -4 PM 4:07

2541-  
W13000010215

3/6/13

## COVER LETTER

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

SUBJECT: **Go Intel 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: **Leighton Clarke Jr.**

Name (Printed or typed)

**9858 Glades Rd # 101**

Address

**Boca Raton, FL 33434**

City, State & Zip

**561-929-6833**

Daytime Telephone number

**melmar11701@aol.com**

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

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DIVISION OF CORPORATIONS  
13 MAR -4 PM 4:07

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 19, 2013

LEIGHTON CLARKE JR.  
9858 GLADES ROAD #101  
BOCA RATON, FL 33434

SUBJECT: GO SERVICES INC.  
Ref. Number: W13000010215

RECEIVED  
13 MAR -4 PM 10:27

We have received your document for GO SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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: 213A00004090

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DIVISION OF CORPORATIONS  
13 MAR -4 PM 4:07

**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: Go Intel Inc.

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is: **13 MAR -4 PM 4: 07**

9858 Glades Rd

# 101

Boca Raton, FL 33434

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: To provide services to the Building Industry.

**ARTICLE IV    SHARES**

The number of shares of stock is: 200 NP

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

Name and Title: Mel Marshall/President

Name and Title: \_\_\_\_\_

Address 9858 Glades Rd

Address: \_\_\_\_\_

# 101

Boca Raton, FL 33434

Name and Title: Leighton Clarke Jr./Director

Name and Title: \_\_\_\_\_

Address 9858 Glades Rd

Address: \_\_\_\_\_

# 101

Boca Raton, FL 33434

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

(conti.)

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: Leighton Clarke Jr.

Address: 9858 Glades Rd # 101

Boca Raton, FL 33434

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DIVISION OF CORPORATIONS

13 MAR -4 PM 4: 07

**ARTICLE VII INCORPORATOR**

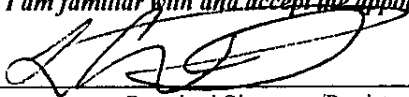
The name and address of the Incorporator is:

Name: Leighton Clarke Jr.

Address: 9858 Glades Rd # 101

Boca Raton, FL 33434

*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

2/26/13  
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

2/26/13  
Date