

P16000045954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

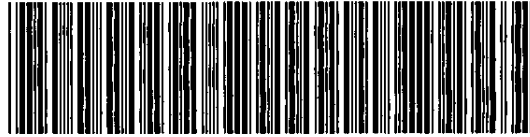
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

2

Office Use Only



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04/08/16--01015--003 **70.00

W16-
27427

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

16 MAY 24 PM 1:14

FILED

05-25-16
/

COVER LETTER

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

SUBJECT: Computer Guy Gil
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: Gil Valmé
Name (Printed or typed)

6190 Woodlands blvd #108
Address

Tamarac FL 33319
City, State & Zip

754-204-7488
Daytime Telephone number

computerguygil@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

April 13, 2016

GIL VALME
6190 WOODLANDS BLVD #108
TAMARAC, FL 33319

SUBJECT: COMPUTER GUY GIL
Ref. Number: W16000027427

We have received your document for COMPUTER GUY GIL and your check(s) totaling \$70.00. 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.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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.

Tim Burch
Regulatory Specialist II

Letter Number: 216A00007629

RECEIVED

16 APR 28 AM 11:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2016

GIL VALME
6190 WOODLANDS BLVD #108
TAMARAC, FL 33319

SUBJECT: COMPUTER GUY GIL INC.
Ref. Number: W16000027427

We have received your document for COMPUTER GUY GIL INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist II

Letter Number: 116A00009669

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: Computer Guy Gil INC.

ARTICLE II PRINCIPAL OFFICE

6190 Woodlands blvd #108
Tamarac FL 33319

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide IT services to
home and small business clients.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gil Valme Owner/Operator Name and Title: _____

Address: 6190 Woodlands blvd #108 Address: _____
Tamarac FL 33319

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
10 MAY 24 PM 1:11
TAMPA, FLORIDA

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: Gil Valme
Address: 6190 Woodlands blvd #108
Tamarac FL 33319

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Gil Valme
Address: 6190 Woodlands blvd #108
Tamarac FL 33319

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: [REDACTED] (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Gil Valme
Required Signature/Registered Agent

4/5/16
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.

Gil Valme
Required Signature/Incorporator

4/5/16
Date

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16 MAY 24 PM 1:14
TAMARAC, FLORIDA