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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
JOHN PAUL ARCIA, PA.**

Certificate of Status	0
Certified Copy	1
Page Count	04
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF**

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be:

John Paul Arcia, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Principal Place of Business:

Mailing Address:

*3129 Oak Ave
Miami, Florida 33133*

*PO BOX 330927
Miami, Florida 33233*

ARTICLE III PURPOSE

The purpose of this corporation shall be:

Legal Services/ Law Firm

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorize to have outstanding is:

100

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ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

*S. Duque Jr. CPA
800 SE 3rd Ave.
Suite 301
Fort Lauderdale, Florida 33316*

ARTICLE VI BOARD OF DIRECTOR (S)

The name and address of the initial board of director(s) shall be:

*John Paul Arcia
3129 Oak Ave.
Miami, Florida 33133*

ARTICLE VII OFFICER (S)

The name, title and address of the officer(s) of this corporation shall be:

*John Paul Arcia
3129 Oak Ave.
Miami, Florida 33133*

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VIII INCORPORATOR(S)

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

John Paul Arcia
3129 Oak Ave
Miami, Florida 33133

The undersigned has (have) executed these Articles of Incorporation this 13th day of January,
2011.


Incorporator Signature

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF
PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE
DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE
APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I
FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES
RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES,
AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION
AS REGISTERED AGENT.


REGISTERED AGENT SIGNATURE

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