

FT17000001054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

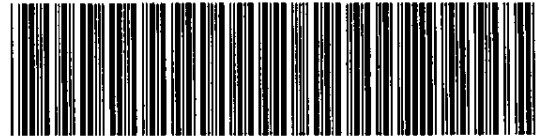
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

MAR -7 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2017

JULIE RUFFOLO
ADEPT STRATEGY AND PUBLIC RELATIONS
5300 POWERLINE RD. #207
FORT LAUDERDALE, FL 33309

SUBJECT: ARCO CARIBE ARCHITECTS, PSC
Ref. Number: W17000018426

We have received your document for ARCO CARIBE ARCHITECTS, PSC 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 listed in number one of the application must be identical to the name listed in the certificate of existence.

EXAMPLE: "ARCO CARIBE ARCHITECTS, PSC, INC." in line 1.,

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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 117A00004139

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Arco Caribe Architects, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Julie Buffolo
Name of Person

Adept Strategy and Public Relations
Firm/Company

5300 Powerline Road #207
Address

Fort Lauderdale, Florida 33309
City/State and Zip code

Julie@Adept.co
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Buffolo at (954) 7691533
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Arco Caribe Architects, PSC, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Puerto Rico 3. 660565654
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. September 15, 2015 5. December 20, 2020
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5300 Powerline Road Fort Lauderdale FL, 33309
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

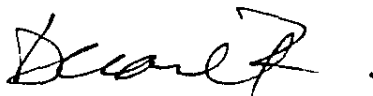
Name: Julie Ruffolo

Office Address: 5300 Powerline Road #207

Fort Lauderdale . Florida 33309
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Alberto Arroyo

Address: 5300 Powerline Rd #207 Fort Lauderdale FL, 33309

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Alberto Arroyo

Address: 5300 Powerline Rd #207 Fort Lauderdale FL, 33309

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. _____

ALBERTO ARROYO - PRESIDENT

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



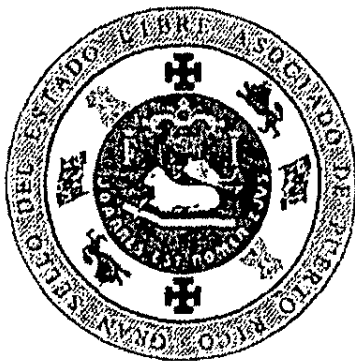
Government of Puerto Rico

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF GOOD STANDING

I, **LUIS G. RIVERA MARÍN**, Secretary of State of the Government of Puerto Rico,

CERTIFY: That, **ARCO CARIBE ARCHITECTS, PSC**, register number **820**, a for profit domestic corporation, organized under the laws of Puerto Rico on **February 12, 1999**, has complied with the filing of its **Annual Reports**.



IN WITNESS WHEREOF, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Government of Puerto Rico, in the City of San Juan, Puerto Rico, today, **February 23, 2017**.

LUIS G. RIVERA MARÍN
Secretary of State

To validate this certificate go to: <http://estado.pr.gov/>

This certificate can be validated an unlimited number of times before its expiration date of 23-Feb-2018.

Certificate Validation Number: **193141-47104533**