# P05000163603

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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Office Use Only

Was 53408

MRD 12/15

# **COVER LETTER**

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

SUBJECT: ARF	FA, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70,00 Filing Fee	Siling Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: _	DMITRIY & OLGA AREFYE	EV (Printed or typed)	
	905 NE 2ND STREET	Address	
	HALLANDALE, FL 33009 City,	State & Zip	
	954-534-5550	elephone number	
	Day title 1		

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



# FLORIDA DEPARTMENT OF STATE Division of Corporations

December 2, 2005

DMITRIY & OLGA AREFYEV 905 NE 2ND STREET HALLANDALE, FL 33009

SUBJECT: ARFA, INC

Ref. Number: W05000053408

We have received your document for ARFA, 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):

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.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2006 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the 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) 245-6879.

Ruby Dunlap Regulatory Specialist New Filing Section

Letter Number: 405A00070188

RECEIVED

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

FILED SECRETARY OF STATE TALLAHASSEC, FLORIDA

05 DEC 15 PM 3: 46

ARTICLE I NAME

The name of the corporation shall be:

ARFA, INC.

ARFA PROPERTIES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

905 NE 2ND STREET HALLANDALE, FL 33009

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE INVESTMENTS AND SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE\_V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

OLGA AREFYEV 905 NE 2ND STREET HALLANDALE, FL 33009

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

DMITRIY AREFYEV 905 NE 2ND STREET HALLANDALE, FL 33009

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

Signature/Registered Agent Date

Date

11/28/2005

Signature/Incorporator Date