

A 0000102379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

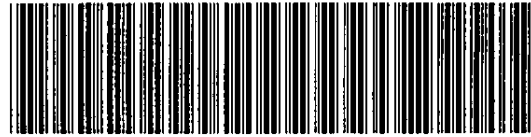
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/20/10--01028--004 **78.75

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2010 DEC 20 PM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓
L Burch DEC 21 2010

COVER LETTER

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

SUBJECT: _____

Archie Entity, 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: _____

Mr. Alwyn Archibald

Name (Printed or typed)

2013 Watersedge Dr.

Address

Deltona, FL ~~32738~~ 32738

City, State & Zip

386-837-8457

Daytime Telephone number

alwynarchibald@yahoo.com

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

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

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:

Archae Entity, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2013 Watersedge Dr.
Deltona, FL 32738

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide excellent delivery services
for customers thru expedite means of transportation
of consumer goods and freight.

ARTICLE IV SHARES

The number of shares of stock is:

(1) - one

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alwyn Archibald
Address: CEO + President
2013 Watersedge Dr.
Deltona, FL 32738

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

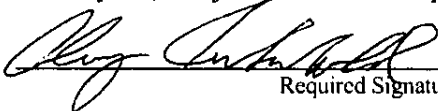
Name: Alwyn Archibald
Address: 2013 Watersedge Dr.
Deltona, FL 32738

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Alwyn Archibald
Address: 2013 Watersedge Dr.
Deltona, FL 32738

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

12/16/10
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

12/16/10
Date

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