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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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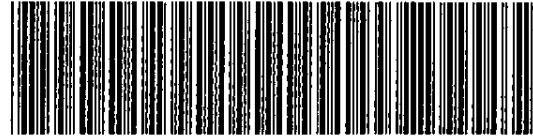
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Access Capital Financial DBA Euro-American Capital Fund, 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:

Alfred Reeves

Name (Printed or typed)

1000 SW 11th Ave, Bldg E, #7

Address

Hallandale, FL 33009

City, State & Zip

954-258-5341

Daytime Telephone number

accesscapitalpartners@yahoo.com

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

accesscapitalpartners@

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

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

Global Capital Investment Fund, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
1000 SW 11th Avenue
Bldg. E, #7
Hallandale, FL 33009

Mailing address, if different is:

P O Box 218
Dania, FL 33004

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To commence Investments and all lawful business on January 2, 2012 requested to be the effective date of the corporation.

ARTICLE IV SHARES

The number of shares of stock is: 2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Francine Labrecque, Director
Address: 1000 SW 11th Avenue, Bldg. E #7
Hallandale, FL 33009

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: Alfred Reeves
Address: 1000 SW 11th Ave Bldg. E, #7
Hallandale, FL 33009

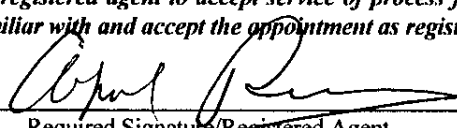
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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alfred Reeves
Address: 1000 SW 11th Ave Bldg. E, #7
Hallandale, FL 33009

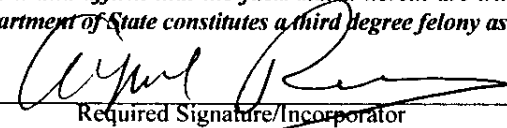
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

December 27, 2011
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

December 27, 2011
Date