

# P23000058053

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000275652 3)))



H230002756523ABC%

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**IKEBANA ARANGO PA**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED

2023 AUG -8 PM 4:51

Division of Corporations

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2023 AUG -8 PM 3:26

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:Ikebana Arango PA**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

6363 SW 109 St.Pinecrest, FL 33156**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**(D) Ikebana Orquidea  
Arango Korth

2023 AUG - 8 PM 3:26

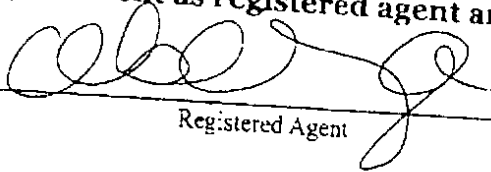
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FL 32307**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Ikebana Orquidea Arango Korth6363 SW 109 ST.Pinecrest FL 33156**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Ikebana Orquidea Arango Korth6363 SW 109 ST.Pinecrest FL 33156

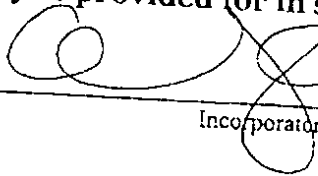
Required Signatures:

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

  
Registered Agent

8/8/23  
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.

  
Incorporator

8/8/23  
Date

ARTICLE VII PURPOSE  
REAL ESTATE

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2023 AUG -8 PM 3:26