

P24000004368

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
ARCA INVESTMENT GROUP INC

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

24 JAN 19 PM 12:17

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T. MATTHEWS

JAN 22 2024

MS

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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: ARCA INVESTMENT GROUP INC 24 JAN 19 PM 12: 17

ARTICLE II PRINCIPAL OFFICE
Principal street address
3162 HIBISCUS STREET
MIAMI, FL 33133
TALLAHASSEE, FLORIDA
3162 HIBISCUS STREET
MIAMI, FL 33133

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: SHARES: 100 @ \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	CAROLLE EL NAFFY - P	Name and Title:	
Address	3162 HIBISCUS STREET	Address:	
	MIAMI, FL 33133		

Name and Title:		Name and Title:	
Address		Address:	

Name and Title:		Name and Title:	
Address		Address:	

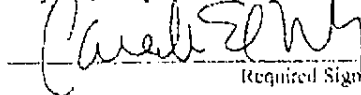
Name and Title: _____ Name and Title: _____

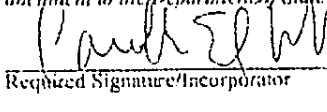
Address: _____ Address: _____

_____**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: CAROLLE EL NAFFYAddress: 3162 HIBISCUS STREETMIAMI, FL 33133**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: CAROLLE EL NAFFYAddress: 3162 HIBISCUS STREETMIAMI, FL 33133**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.*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 Agent1/16/24
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/Incorporator1/16/24
Date