

PI4000001522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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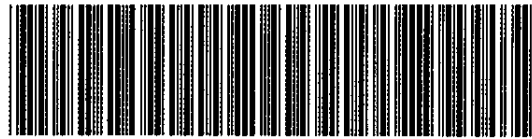
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

Platform Law, P.A.

SUBJECT: _____
(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

Bin Yan
FROM: _____
Name (Printed or typed)

1541 Lugo Avenue

Address

Coral Gables, FL 33156

City, State & Zip

786-766-1505

Daytime Telephone number

platformlaw@gmail.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 Platform Law, P.A.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address
1541 Lugo Avenue
Coral Gables, FL 33156

Mailing address, if different is: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE to provide legal services
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 2000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Bin Yan, Director	Name and Title:	_____
Address	1541 Lugo Avenue Coral Gables, FL 33156	Address:	_____
_____	_____	_____	_____

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: Bin Yan

Address: 1541 Lugo Avenue

Coral Gables, FL 33156

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Bin Yan

Address: 1541 Lugo Avenue

Coral Gables, FL 33156

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

12/30/2013

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

12/30/2013

Date

Effective Date:

January 24, 2014