# F10000004016

(Requestor's Name)				
(Address)				
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(City/	State/Zip/Phone	e #)		
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PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(545).	Tropo Emily Mar	,		
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Certified Copies	Certificates	of Status		
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Special Instructions to Fil	ling Officer:	·		
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEF FINDIA

MRD 9/8

1210-29860

#### **COVER LETTER**

TO:	New Filing Section Division of Corporations			
SUBJ	ECT: YAMAZUKI, INC			
		corporatio	n - must include suffix	
Dear S	ir or Madam:			
"Certif	closed "Application by Foreign Corporate of Existence," or "Certificate of referenced foreign corporation to tran	Good Sta	nding" and check are sub-	
Please	return all correspondence concerning	this matte	r to the following:	
JUN X	U			
		Name of	Person	
YAMA	ZUKI, INC			
		Firm/Cor	npany	
6560 B	BANDINI BLVD			
		Addı	ess	
COMM	TERCE, CA 90040			,
	· · · C	City/State a	and Zip code	
YAMAZ	ZUKI.INC@GMAIL.COM	•	**************************************	•
·	E-mail address: (t	o be used	for future annual report n	otification)
For fur	ther information concerning this matte	er, please	call:	
KRYST	-AL at	(323	331-2576	
	Name of Person	\	Code & Daytime Telepho	one Number
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FI	ction rporations
Enclose	ed is a check for the following amount	u,		, .
□ \$70.	.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 22, 2010

JUN XU YAMAZUKI, INC 6560 BANDINI BLVD COMMERCE, CA 90040

SUBJECT: YAMAZUKI, INC Ref. Number: W10000029860

We have received your document for YAMAZUKI, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II

Letter Number: 110A00015395

06/10/2010 13:18

#2471 P 001/001

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOW!! 'G IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(If name unav	ailable in Florida, enter alternate cor	rporate name adopted for the purpose of truesacting business in Florid	ia)
2. CALIFORNIA	4	3. 27-1423603	
	y under the law of which it is incor		<del></del>
4. NOVEMBER	30, 2009	s Perpetual.	
··· ————	te of incorporation)	(Duration: Year corp. will wase to exist or "perpenual"	<u>"</u>
6			<del></del>
		ed business in Florida, if prior to registratio () 501 & 607.1502, F.S., to determine penalty liability)	
CECO DANIDIN	•		
7, 6360 BANDIN	BLVD, COMMERCE, CA 90040	al office address)	<del>_</del>
CIO SABBANT	'HA SHAN, PO BOX 12141., SA		
. OO SAMARI		mailing address)	<del>-</del>
	IG LOW SPEED VEHICLE, ATV		
		ne state or country to be carried out in state of Florida)	_
(Purpose	(s) of corporation authorized in how		- 5 TI
(Purpose	(s) of corporation authorized in how	ne state or country to be carried out in state of Florida)	10 88
(Purpose 9. Name and street Name:	(s) of corporation authorized in hore est address of Florida registered a ERNESTO NOCEDA	ne state or country to be carried out in state of Florida)	TIL.
(Purpose 9. Name and street Name:	(s) of corporation authorized in hore est address of Florida registered a ERNESTO NOCEDA 1789 W. 32ND PLACE	agent: (P.O. Box NOT acceptable)	TILT 10 SEP -7 PL
(Purpose 9. Name and street Name:	(s) of corporation authorized in home et address of Florida registered a ERNESTO NOCEDA 1789 W. 32ND PLACE HIALEAH	agent: (P.O. Box NOT acceptable)	TIL TO
(Purpose	(s) of corporation authorized in hore est address of Florida registered a ERNESTO NOCEDA 1789 W. 32ND PLACE	agent: (P.O. Box NOT acceptable)	TILED 10SP-7 PM 4:3
9. Name and street Name: Office Address:	(s) of corporation authorized in hore est address of Florida registered a ERNESTO NOCEDA  1789 W. 32ND PLACE  HIALEAH  (City)	agent: (P.O. Box NOT acceptable)  P.O. Box NOT acceptable)  P.O. Box NOT acceptable)  P.O. Box NOT acceptable)  C.O. Box NOT acceptable)  C.O. Box NOT acceptable)	TIL TO
(Purpose  9. Name and stre  Name:  Office Address:  10. Registered a  Having been name	(s) of corporation authorized in hore est address of Florida registered a ERNESTO NOCEDA  1789 W. 32ND PLACE  HIALEAH  (City) gent's acceptance: and as registered agent and to acceptance and to acceptance.	ne state or country to be carried out in state of Florida)  agent: (P.O. Box NOT acceptable)  Florida 33012  (Zip code)  ccept service of process for the above: stated corporation at the	TILED PH 4: 30  TO SEP -7 PH 4: 30  Machine Ma
(Purpose  9. Name and street  Name:  Office Address:  10. Registered a  Having been nan  designated in this  further agree to	(s) of corporation authorized in hore est address of Florida registered a ERNESTO NOCEDA  1789 W. 32ND PLACE  HIALEAH  (City)  gent's acceptance: ned as registered agent and to accept the comply with the provisions of ali	ne state or country to be carried out in state of Florida)  agent: (P.O. Box NOT acceptable)  Florida 33012  (Zip code)  ccept service of process for the above: stated corporation at the se appointment as registered agent and agree to act in this capal is statutes relative to the proper and an applete performance of m	acity. I
(Purpose  9. Name and street  Name:  Office Address:  10. Registered a  Having been nan  designated in this  further agree to	(s) of corporation authorized in hore est address of Florida registered a ERNESTO NOCEDA  1789 W. 32ND PLACE  HIALEAH  (City)  gent's acceptance: ned as registered agent and to accept the comply with the provisions of ali	ne state or country to be carried out in state of Florida)  agent: (P.O. Box NOT acceptable)  Florida 33012  (Zip code)  Cocept service of process for the above: stated corporation at the seappointment as registered agent and agree to act in this capa	acity. I
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(Purpose  9. Name and street  Name:  Office Address:  10. Registered a  Having been nan  designated in this  further agree to	(s) of corporation authorized in hore est address of Florida registered a ERNESTO NOCEDA  1789 W. 32ND PLACE  HIALEAH  (City)  gent's acceptance: ned as registered agent and to accept the comply with the provisions of ali	ne state or country to be carried out in state of Florida)  agent: (P.O. Box NOT acceptable)  Florida 33012  (Zip code)  ccept service of process for the above: stated corporation at the se appointment as registered agent and agree to act in this capal is statutes relative to the proper and an applete performance of m	acity. I

11. Attached is a certificate of existence duly authenticated, not more than 90 days price to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:	FILED		
A. DIRECTORS	10.000		
Chairman:	10 SEP -7 PH 4: 30		
Address:	TALL AHASSEE FLORINA		
Vice Chairman:			
Address:			
Director:			
Address:			
Div.			
Director:			
Address:			
B. OFFICERS			
President:			
Address:			
Vice President:			
Address:			
Secretary:			
Address:			
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing	and additional officers and/or directors		
13.	accomond officers and of encerois.		
(Signature of Director or Officer listed in number 12	of the application)		
14. JUN XU, CHIEF OPERATING OFFICER			
(Typed or printed name and capacity of person sign	ing application)		

### Yamazuki, Inc

6560 Bandini Blvd Commerce, CA 90040 Tel: 323-331-2576

Email: Yamazuki.Inc@gmail.com

FILED

10 SEP -7 PM 4: 30

SECRETARY OF STATE TALLAHASSEE FLORIDA

### Additional Officer

Chief Operation Officer: JUN XU

Address: 21245 Cottonwood Lane, Diamond Bar, CA 91789

## State of California Secretary of State

CERTIFICATE OF STATUS

FILED

10 SEP -7 PH 4: 30

SECRETARY OF STATE TALLAHASSEE FLORIDA

ENTITY NAME:

YAMAZUKI, INC.

FILE NUMBER:

C3238122

FORMATION DATE:

11/30/2009

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of August 10, 2010.

DEBRA BOWEN Secretary of State