

F1900003514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

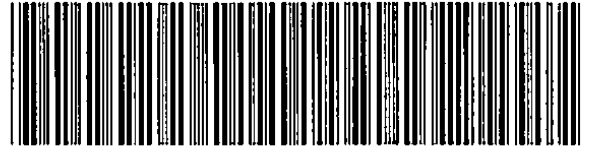
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19-62488

Office Use Only



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06/21/19--01016--019 **78.75

FILED
2019 JUL 31 PM 2:39
RECEIVED

D. BRUCE

JUL 31 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 8, 2019

ANNIE LUO, CPA - 6216-731-3633
5534 HALLOWELL AVE.
ARCADIA, CA 91007

SUBJECT: BCM AMERICA INC.
Ref. Number: W19000062488

We have received your document for BCM AMERICA INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L17000252955.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce
Corporate Records Supervisor II

Letter Number: 019A00013699

2019 JUL 31 PM 2:35

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BCM AMERICA INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ANNIE LUO, CPA

Name of Person

Firm/Company

5534 HALLOWELL AVE.,

Address

ARCADIA, CA91007

City/State and Zip code

AnnieLuo.CPA@GMAIL.COM

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

For further information concerning this matter, please call:

ANNIE LUO, CPA

at (626) 731-3633

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. BCM AMERICA INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

BCM AMERICA OF FL INC

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CALIFORNIA

(State or country under the law of which it is incorporated)

3. 37-1906967

(FEI number, if applicable)

4. AUG. 20, 2018

(Date of incorporation)

5. N/A

(Date of duration, if other than perpetual)

6. AGU. 25, 2018

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 31131 OVERBROOK ST., SORRENTO, FL 32776

(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CHRISTINA HAMLIN

Office Address: 31131 OVERBROOK ST.

SORRENTO

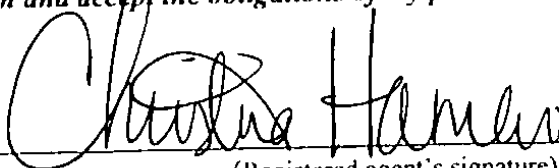
(City)

Florida 32776

(Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior 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.

FILED
2018 JUL 31 PM 2:39
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: ZHI QU

Address: ROOM 610, NO 346 QINGTAI STEET, SHANGCHENG DISTRICT, HANGZHOU, CHINA

Vice Chairman: N/A

Address: _____

Director: N/A

Address: _____

Director: N/A

Address: _____

2019 JUL 31 PM 2:35
WILLIAMSON COUNTY, TN
CLERK

B. OFFICERS

President: ZHI QU

Address: ROOM 610, NO 346 QINGTAI STEET, SHANGCHENG DISTRICT, HANGZHOU, CHINA

Vice President: N/A

Address: _____

Secretary: LIYING HE

Address: 3323 HAWKWOOD RD., DIAMOND BAR, CA 91765

Treasurer: LIYING HE

Address: 3323 HAWKWOOD RD., DIAMOND BAR, CA 91765

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Liying He

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. Liying He

(Typed or printed name and capacity of person signing application)

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

BCM AMERICA INC.

FILE NUMBER: C4186268
FORMATION DATE: 08/20/2018
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, 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 May 29, 2019.

ALEX PADILLA
Secretary of State