## F19000000475

(Red	questor's Name)				
(Add	dress)				
(Address)					
(City	//State/Zip/Phon	ne #)			
PICK-UP	☐ WAIT	MAIL			
(Bus	siness Entity Na	me)			
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



000335122

10/06/19--01014--007

TAIN IN THE STARY (TV)

D. PRUCE NCT 21 2019

## **COVER LETTER**

ΓO: Registration Section Division of Corporations			
SUBJECT: Szechuan Empire North, Inc.			
	orporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corpo "Certificate of Existence," or "Certificate of above referenced foreign corporation to trans	Good Stand	ing" and check are submitted to regis	
Please return all correspondence concerning	this matter	o the following:	
Sheng Lin			
	Name of P	erson	
Szechuan Empire North, Inc.			
	Firm/Comp	any	
39470 West 14 Mile Rd.			
	Addres	S	
Walled Lake, MI 48390		<u>-</u>	
C	City/State and	d Zip code	
tomlinglobal@yahoo.com	o ha usad fo	r future annual report notification)	
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:		10 10 10 10 10 10 10 10 10 10 10 10 10 1	
Randall H. Darnell at 6	(734	) 246-9240	
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 amoun	t:		
□ \$70.00 Filing Fee □ \$78.75 Filing Fe Certificate of S		\$78.75 Filing Fee & S87.50 F Certified Copy Certifies  Certifies	ate of Si

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRABUSINESS IN FLORIDA

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

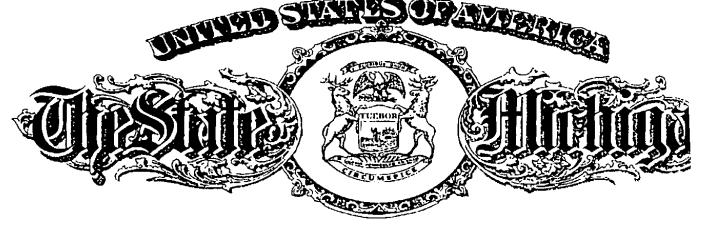
ر Szechuan Empii	re North, Inc.			
	orporation; must include "INCORPORA" orp." "Inc." "Co." or "Corp.")	ſED," "C	COMPANY," "CORPORATION,"	
N/A				
(If name unavaila	able in Florida, enter alternate corporate r	iame ado	oted for the purpose of transacting b	usiness in F
Michigan	chigan 3 3		3-3271611	
(State or countr	y under the law of which it is incorporate		(FEI number, if applicable)	
August 21, 1995	i	5.		
(Date	of incorporation)	_	(Date of duration, if other than perpetua	
October 15, 201	9			
4000 0 - 45 0	(SEE SECTIONS 607.1501 & 6		orida, if prior to registration) F.S., to determine penalty liability)	
1000 South Ocea	n Boulevard, Pompano Beach, FL 33062	sisaisal a	(Non addrage)	
	(1)	rincipai c	office address)	
	(Current	mailine a	Idress, if different)	10.75
	(Outron)		sure	5.3
. Name and stree	et address of Florida registered agent:	(P.O. E	ox NOT acceptable)	 *** .
	l Sheng Lin	•	,	orgina Variation
Name:	. Orieng En		_	He of the second
Office Address:	1000 South Ocean Boulevard		_	18
Pompano Beach	Pompano Beach		Florida 33062	
	(City)		(Zip code)	
. D. 1.				
	ent's acceptance: ned as registered agent and to accept	service i	of process for the above stated c	orporation
lesignated in this	application, I hereby accept the app	ointmen	t as registered agent and agree	to act in tl
	omply with the provisions of all state familiar with and accept the obligation			performan
mies, una i am j	amiliar with and accept the oppinguite	ms oj m	y position us registereu ugent.	
	Z	U . ~ ~ ~	3	
_	**		nt's signature)	<del></del>

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

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: I Sheng Lin Address: 39470 West 14 Mile Rd. Walled Lake, MI 48390 Vice Chairman: Address: Address: \_\_\_\_\_\_ Address: \_\_\_\_\_\_ B. OFFICERS President: Vice President: Secretary: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or director Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stat are true and that he or she is aware that false information submitted in a document to the Department of State a third degree felony as provided for in s.817.155, F.S.

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

13. I Sheng Lin



## Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

SZECHUAN EMPIRE NORTH, INC.

was validly incorporated on August 21, 1995 as a Michigan DOMESTIC PROFIT CORPORATION, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

CONTRACTOR A Commercial Literary

Sent by electronic transmission

Certificate Number: 19095700690

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 23rd day of September, 2019.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau

Verify this certificate at: URL to eCertificate Verification Search http://www.michigan.gov/corpverifycertificate.