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Special Instructions to	Eiling Officer	
Special instructions to	Fining Officer.	

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Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: _ YUYANG & GUAN 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:

JIA L GUAN

YUYANG INC

Name of Person

Firm/Company

1501 SW 99TH CT

MIAML FL 33174

City/State and Zip code

Address

JLIN@HHL-US.COM

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

For further information concerning this matter, please call:

 JIA L GUAN
 at (786)
 303-9232

 Name of Person
 Area Code
 Daytime Telephone Number

 STREET/COURIER ADDRESS:
 MAILING ADDRESS:

 Registration Section
 Registration Section

 Division of Corporations
 Division of Corporations

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE

□ \$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.

١.	YUYANG & GUAN INC
	(Enter name of corporation; must include "INC

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

YUYAN	G&	GUAN	L

OREGON	3	87-3243834	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
10/25/2021	5	·	
(Date	of incorporation)	(Date of duration, if other t	han perpetual)
		in Florida, if prior to registration) 1502, F.S., to determine penalty liabilit	y)
1501 SW 99TH (.T. MIAMI, FL 33174		
	(Principal of	fice <u>street</u> address)	
	(Current maili	ing address, if differem)	
N uno pud strop	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)	2022 JAN -3 SECRE IARY TALL AHASSE
Name.	JIA L GUAN		AS AS
Name.	JIA 1. GUAN 		rn es
		 . Florida ³³¹⁷⁴	N - 3 PH 2: 30 IARY OF SIAIE ASSEE, FLORID

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.

A. DIRFCTORS

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Charman	IIA L GUAN	□ Chairman	Name:
DVice Chairman		□Vice Chairman	
M Director	MIAMI. FL 33174	ElDirector	
DPresident		DPresident	
□Vice Presiden)		□Vice President	<u> </u>
⊡Secretary	L] Freasurer	ElSecretary	DTreasurer
□01her	Other	DOther	Other
DChairman	Name,	[]Chainnan	Name
⊡Vide Chairman	Address	□Vice Chairman	Address:
Director		Director	
DPresident		□President	
🗇 Vice President		DVice President	
DSecretary	Treasurer	Secretary	Treasurer
DOther	[]Other	□Other]Othe;
DChannan	Name	🛛 Chanman	Name
ElVice Chairman	Address	⊡Viee Charman	Address
Director		Director	
Diffesident		□President	
CVice President		∏Vice President	
Secretary	Treasact	□ Secrotary	Treasurer
LJOther	L]Other	Other	□Other
Important Notice: J individuals may be	Use an attachment to report more than six (6). The attac added to the index, when tilling your Florida Departmer	hment will be unaged at of State Annual Re	d for reporting purposes only. Non-indexed port form.

The officer or director signing this document (and who is listed in number 11 above) uffirms 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 \$817,155, F.S.

Signature of Director or Officer

JIA L GUAN

12.

No. 1665 P. 3/3





OFFICE OF THE SECRETARY OF STATE Corporation Division

Certificate of Existence 647Y444T1

I, SHEMIA FAGAN, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

YUYANG & GUAN INC

is

Incorporated

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

SHEMIA FAGAN, SECRETARY OF STATE 12/10/2021