P01000081881

HUI MIN ZHOU 7328 S W 48 STREET MIAMI, FL 33155

Department of State Division of Corporations P O Box 6327 Tallahassee, Florida 32314

700004539087—-⁷2 -08/16/01--01095--008 ******78.75 ******78.75

RE: SHING ACUPUNCTURE & HERBAL THERAPY, INC

Enclosed is a check for \$ 78.75 together with two copies of the articles of incorporation of SHING ACUPUNCTURE & HERBAL THERAPY, INC

Please return a certified copy to the registered agent of the corporation:

HUI MIN ZHOU 7328 S.W 48 STREET MIAMI, FL 33155

Thank you for your attention to this request.

Sincerely,

01 AUG | 6 PH |: 30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

<u>OF</u>

SHING ACUPUNCTURE & HERBAL THERAPY, INC.

The undersigned incorporators, for the purpose of forming a corporation under the Florida Corporation Act, Hereby adopt the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

SHING ACUPUNCTURE & HERBAL THERAPY, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation shall be:

7328 S W 48 STREET MIAMI, FL 33155

ARTICLE III CAPITAL STOCK

The number of Shares of Stock that this corporation is authorized to issue and have outstanding at any one time is:

10,000 (Ten Thousand)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent and the initial office of the corporation is:

HUI MIN ZHOU 7328 S W 48 STREET MIAMI, FL 33155

ARTICLE V INCORPORATORS

The name and street address of the incorporators to these Articles of Incorporation are:

Hui Min Zhou 7328 SW 48 Street Miami, FL 33155

The undersigned have executed these Articles of Incorporation this 14 Day of

x Hu Min 2404.
Signature

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT N THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION OF REGISTERED AGENT

Signature

Hei Min 2 Hou

Date