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JAN 14 PM 3:26

1-21-8

TRANSMITTAL LETTER

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

SUBJECT: ST. AUGUSTINE 2185 INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: PAUL KIANG
Name (Printed or typed)

6473 CONROY RD. # 809
Address

ORLANDO, FL 32835
City, State & Zip

407- 383- 7182
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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STATE OF FLORIDA
DIVISION OF CORPORATION
03 JAN 14 PM 3:26

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ST. AUGUSTINE 2185 INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6473 CONROY RD. #809 ORLANDO, FL 32835

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NNN REAL ESTATE INVESTMENT - RESTAURANT PROPERTY

ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

PAUL KIANG

6473 CONROY RD. #809 ORLANDO, FL 32835

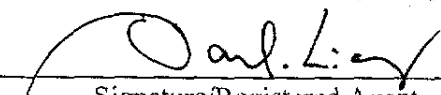
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PAUL KIANG

6473 CONROY RD. #809 ORLANDO, FL 32835


Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1-9-2003

Date



Signature/Incorporator

1-9-2003

Date