

P03000034134

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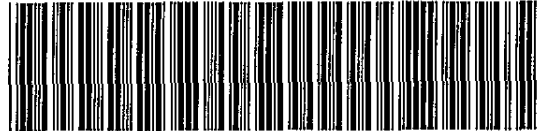
(Business Entity Name)

(Document Number)

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RECEIVED  
03 MAR 25 AM 11:12  
STATE  
DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
03 MAR 25 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

gpc  
3/2

OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

**TERESA ROMAN ( TALLAHASSEE REPRESENTATIVE)**

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. TZE'S ACUPUNCTURE AND HERB, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

## ARTICLES OF INCORPORATION

*The undersigned incorporate(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

TZE'S ACUPUNCTURE AND HERB, INC.

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TALLAHASSEE, FLORIDA

### ARTICLES II PRINCIPAL OFFICE

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

8150 SW 8<sup>TH</sup> STREET, SUITE # 217  
MIAMI, FL 33144

### ARTICLES III SHARES

The numbers of shares of stock that this corporation is authorised to have outstanding at any one time is:

500 SHARES \$ 1.00 PAR VALUE

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHING HSIANG TZE  
8150 SW 8<sup>TH</sup> STREET, SUITE # 217  
MIAMI, FL 33144

**ARTICLES V      INCORPORATE(S)**

The name and street address (es) of the incorporate(s) to these Articles of Incorporation is (are):

CHING HSIANG TZE  
8150 SW 8<sup>TH</sup> STREET, SUITE # 217  
MIAMI, FL 33144


PRESIDENT, SECRETARY, TREASURER,  
DIRECTOR

**ARTICLE VI DIRECTOR (S)**

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is(are):

CHING HSIANG TZE  
8150 SW 8<sup>TH</sup> STREET, SUITE # 217  
MIAMI, FL 33144

The undersigned incorporate(s) has (have) executed these Articles of Incorporation this  
24<sup>TH</sup> day of MARCH, 2003

		
SIGNATURE	CHING HSIANG TZE	PRESIDENT, SECRETARY, TRASURER DIRECTOR
<hr/>		
SIGNATURE		
<hr/>		
SIGNATURE		
<hr/>		

**Articles of Incorporation**

**Filling Fee - \$35.00**

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISION OF SECTION 607 .051, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANISED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:

**TZE'S ACUPUNCTURE AND HERB, INC.**

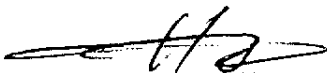
The name and address of the registered agent and office is:

**CHING HSIANG TZE**  
(Name)

**8150 SW 8<sup>TH</sup> STREET, SUITE # 217**  
(PO Box not acceptable)

**MIAMI, FL 33144**  
(City/State/Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



CHING HSIANG TZE

(Signature)

**03/24/2003**  
(Date)

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TALLAHASSEE, FLORIDA