P03000149922

| (Re | questor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| V | | |
| (Cit | ty/State/Zip/Phone | e#) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| | 0 45-4- | 1000 |
| Certified Coples | _ Certificates | or status |
| Special Instructions to | Filing Officer: | <u> </u> |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Office Use On | lv |



700025124847

12/08/03--01028--012 **07.50

FILED

03 DEC -8 PH 3-22

SECRETARY OF STATE

12/12/25

TRANSMITTAL LETTER

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

| SUBJECT: | CHINKIM Inc (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | udasuraix) |
|----------------------|----------------------------------|----------------------------|--|
| Enclosed are an orig | inal and one (1) copy of the art | icles of incorporation and | a check for: |
| □ \$70.00 | □ \$78.75 | □ \$78.75 | S \$87.50 |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee. |
| · · | & Certificate of Status | & Certified Copy | Certified Copy & Certificate of Status |
| | | ADDITIONAL CO | |
| FROM: _Ch | nin K Kim | | |
| | Name | e (Printed or typed) | |
| | 6729 Paul Revere Ct | Address | |
| | | Address | |
| | Orlando, Fl 32809 City | , State & Zip | |
| | 407 812 4231 Daytime | Telephone number | |

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

| ARTICLE I NAME | FILED |
|---|--|
| The name of the corporation shall be: | TILLU |
| CHINKIM INC. | 03 DEC -8 PH 3:22 |
| | SECRETARY OF STATE |
| ARTICLE II PRINCIPAL OFFICE | TALLAHASSEE, FLORIDA |
| The principal place of business/mailing address is: | () (all in too all it all in the interest of t |
| 6729 Paul REVERE CT | |
| 6729 Paul REVERE C+ Orlando, Fl 32809 | |
| , | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | - |
| The Tratallation Commence is | |
| Tile Installation Company | |
| , | |
| ARTICLE IV SHARES The number of shares of stock is: | |
| The number of shares of stock is: 70 | |
| | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS | |
| List name(s), address(es) and specific title(s): | |
| MR. Chink. Kim owner | |
| Owner Co | |
| | |
| | |
| ARTICLE VI REGISTERED AGENT | |
| The name and Florida street address of the registered agent is: | |
| MR. Chink. Kim | |
| 6729 Paul Revene Ct. ORlando, Fl 3280 | \ 9 |
| 6/29 Favi Neverce C). OR 140/10, 11 3200 | J 1 |
| ARTICLE VII INCORPORATOR | |
| The <u>name and address</u> of the Incorporator is: | |
| MR CHINK. KIM OWNER | |
| 6729 Paul REVERE C+ | |
| Oxlando, F1 32809 | |
| ************************************** | ******* |
| Having been named as registered agent to accept service of process for the above stated corpor certificate, I am familiar with and accept the appointment as registered agent and agree to act in | ation at the place designated in this this capacity |
| 11 111 111 | , , |
| Chi KV. 19m | 12/05/03 |
| Signature/Registered Agent | '/ Date |
| | Date |
| (m n. 10- | 2/05/07 |
| Signature/Incorporator | ' Date |

ARTICLES OF INCORPORATION

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