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SECRETARY OF STATE TALLAHASSEE, FLORIDA

mRD

TRANSMITTAL LETTER

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

SUBJECT: MYOUG	Hee Kim, Inc	TE NAME - MUST INCL	It as a first the pink to a	
	(PROPOSED CORPORA	TE NAME - MOST INCL	CDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	a check for:	
Z \$70.00	\$78.75	\$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
1 2 . 00	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
	ADDITIONAL COPY REQUIRED			
		<u> </u>		
FROM: MY	love, Hee Kim			
	Name	e (Printed or typed)		
	576 Edgewood Ave S			
Address				
	Jacksonville, FL 32205			
,		, State & Zip	<u> </u>	
		,		
	904-389-9743			
		Telephone number	,	
	Dayanic			

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

ARTICLES OF INCORPORATION

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

SECRETARY OF STATE TALLAHASSEE. FLORIDA
MUSSEE, FLORIDA

05 JUL 11 PM 2: 13

ARTICLE I NAME

The name of the corporation shall be:

MYONG

Hee Kim, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 576 Edgewood Ave S
Jacksonville, FL 32205

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any Lawful purpose

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

"Yow" Hee Kim, PSTD

576 Edgewood Ave S

Jacksonville, FL 32205

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

MYOUG Hee Kim 576 Edgewood Ave S Jacksonville, FL 32205

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MYONG Hee Kim 576 Edgewood Ave S Jacksonville, FL 32205

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

-Klynn		7/8/05
Signature/Registered Agent		Date
	gas en en en	7/8/5
Signature/Incorporator		Date