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ALARCEE BLOOM

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TRANSMITTAL LETTER

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

SUBJECT: UN	ICLE K.C. INC.			
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)	
Enclosed are an o	riginal and one (1) copy of the arti	cles of incorporation and	a check for:	
☐ \$70.00 Filing Fee	•	■ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: _	RACHEL ZHANG			
	Name	(Printed or typed)		
	C/O 136 BOWERY SUITE	203		
	Address			
	NEW YORK, NY 10013			
	City, State & Zip			
	212-334-5169			
	Daytime T	elephone number		

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

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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:

UNCLE K.C. INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4400 W SAMPLE ROAD STE 146 COCONUT GREEK, FL 33073

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: TO OPERATE A CHINESE RESTAURANT.

ARTICLE IV SHARES

The number of shares of stock is:

200 SHARES / NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): MIN JIANG 4400 W SAMPLE ROAD STE 146 COCONUT GREEK, FL 33073

ARTICLE VI REGISTERED AGENT

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

MIN JIANG 4400 W SAMPLE ROAD STE 146 COCONUT GREEK, FL 33073

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

MIN JIANG 4400 W SAMPLES ROAD STE 146 COCONUT GREEK, FL 33073

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

x Siam	7/27/2004
Signature/Registered Agent	Date
* Jlang	7/27/2004
Signature/Incorporator	Date