

PO5000124425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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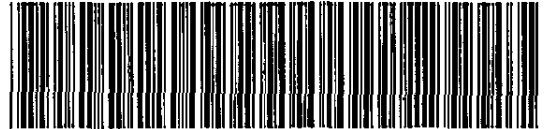
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/12/05
BWK

TRANSMITTAL LETTER

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

SUBJECT: CHEN & CHAN ASSOCIATES 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: CHEN & CHAN ASSOCIATES INC

Name (Printed or typed)

39 EAST BROADWAY, SUITE 504

Address

NEW YORK, NY 10002

City, State & Zip

212-693-2060

Daytime Telephone number

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)

ARTICLE I NAME

The name of the corporation shall be:

LIAN'S CHINA WOK INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1109 DEL PRADO BLVD, SUITE # 6, CAPE CORAL, FL 33990

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

OPERATING CHINESE CUISINE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

SAI LIAN
1109 DEL PRADO BLVD., SUITE # 6
CAPE CORAL, FL 33990

ARTICLE VII INCORPORATOR

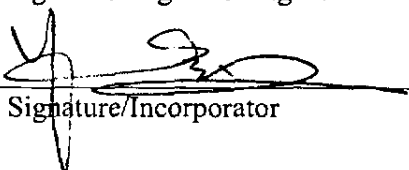
The name and address of the Incorporator is:

YONG CHAT CHEN
CHEN & CHAN ASSOCIATES, INC
39 EAST BROADWAY, SUITE 504, NEW YORK, NY 10002

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

Lian Sai

Signature/Registered Agent



Signature/Incorporator

FILED

05 SEP -7 PM 2: 17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08/24/05
Date

08/24/05
Date