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COVER LETTER

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

\$70.00

Filing Fee

\$78.75

Filing Fee

& Certificate of Status

SUBJECT: HIN ACUPUNC TURE, Inc., (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

407 – 965 – 3759

Daytime Telephone number

- 6 ₁
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\$78.75

Filing Fee

& Certified Copy

\$87.50

Filing Fee,

Certified Copy

& Certificate of

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:
HIN ACUPUNCTURE INC
MIN MODPONCIONE INC
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
11183 S. ORANGE BLOSSOM TRAIL, UNIT 204-G
ORLANDO, FL 32837
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ACUPUNCTURE, ORIENTAL HERBAL
ARTICLE IV SHARES
The number of shares of stock is:
(00
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):
HINGHIN KWOK PRESIDENT
ARTICLE VI REGISTERED AGENT
ARTICLE VI REGISTERED AGENT
THE NUMBER AND KINEING REPORT UNITERS LET LE BOY IN LE GOCENTONIE OF THE POSICIONAL GOOD 101 1 TO 1
HING HIN KWOK
11183 S. ORANGE BLOSSOM TRAIL, UNIT 200-9
The state of the s
ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
HIN ACUPUNCTURE INC HING HIN KWOK
11183 S. DRANGE BLOSSOM TRAIL, UNIT 204-G

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
dimen was the second
Signature/Registered Agent HINGT HIN KWOK 11-01-2006 Date HINGT HIN KWOK 11-01-2006
GLOSON HINGE HINKWOK 11-01-2006

Date

Signature/Incorporator