

P08000056987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

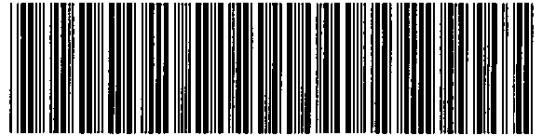
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/27/08--01033--021 **78.75

FILED
08 JUN - 9 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

100 96115

COVER LETTER

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

SUBJECT: TCI CORP

(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: Natalia Restrepo

Name (Printed or typed)

9298 Boca Gardens Pkwy Apt B

Address

Boca raton, Fl 33496

City, State & Zip

561 305 8209

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 28, 2008

NATALIA RESTREPO
9298 BOCA GARDENS PKWY APT B
BOCA RATON, FL 33496

SUBJECT: TCI CORP
Ref. Number: W08000026145

We have received your document for TCI CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 808A00033488

FILED

08 JUN -9 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

CAI SHEN CO

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

9298 Boca Gardens Pkwy Apt B
Boca Raton, FL 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting

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):

Natalia Restrepo
9298 Boca Gardens Pkwy apt B
Boca Raton FL 33496
Director

ARTICLE VI REGISTERED AGENT

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

Natalia Restrepo
9298 Boca Gardens Pkwy apt B
Boca Raton, FL 33496

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Natalia Restrepo
9298 Boca Gardens Pkwy apt B
Boca Raton, FL 33496

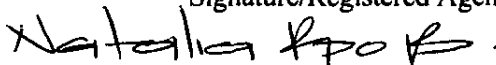
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

05/19/2008

Date



Signature/Incorporator

05/18/2008

Date