

P080000971310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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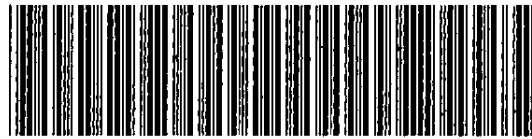
(Business Entity Name)

(Document Number)

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08 JUL 28 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Per*

## COVER LETTER

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

SUBJECT: THE ORCHID BISTRO  
(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: LOUANN NGUYEN  
Name (Printed or typed)

4125 CAROLWOOD DRIVE  
Address

MELBOURNE, FL. 32934  
City, State & Zip

(321) 917-4739  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 17, 2008

LOUANN NGUYEN  
4125 CAROLWOOD DRIVE  
MELBOURNE, FL 32934

SUBJECT: THE ORCHID BISTRO  
Ref. Number: W08000033877

We have received your document for THE ORCHID BISTRO 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 corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6052.

Paisley A Alford  
Clerk  
New Filing Section

Letter Number: 208A00041914

# 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:

THE ORCHID BISTRO CORPORATION, ~~CORP.~~

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3696 N. WICKHAM ROAD  
MELBOURNE, FL. 32935

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RESTAURANT

## 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):

UNG MA & LOUANN NGUYEN  
4125 CAROLWOOD DRIVE, MELBOURNE, FL. 32934  
PRESIDENT / DIRECTOR

## ARTICLE VI REGISTERED AGENT

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

LOUANN NGUYEN  
4125 CAROLWOOD DRIVE  
MELBOURNE, FL. 32934

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LOUANN NGUYEN  
4125 CAROLWOOD DRIVE  
MELBOURNE, FL. 32934

\*\*\*\*\*  
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

LouAnnnguyen  
Signature/Registered Agent

LouAnnnguyen  
Signature/Incorporator

7/14/08  
Date

7/14/08  
Date

FILED  
08 JUL 28 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA