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(Requesto	r's Name)	
(Address)		
(Address)		
,		
(City/State	e/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business	Entity Name)	
·	, ,	
(Documen	nt Number)	
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Certified Copies (Certificates of Status	
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06/01/11--01009--001 **78.75



Total

COVER LETTER

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

SUBJECT: Duong Global Enterpris	ses, Inc.
(PROPOSED CORPORA	FE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Tori T. Duong Name	(Printed or typed)
391 Misty Meadow Dr.	ddress
Ocoee, FL 34761	State & Zip
321-287-3437 Daytime Te	lephone number
toriduong@msn.com E-mail address: (to be used	for future annual report notification)

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)

<u>ARTICLE II</u>			
	Principal street address	Mailing a	address, if different is:
	391 Misty Meadow Dr. Ocoee, FL 34761		
	Occee, FL 34761		
ARTICLE III	PURPOSE		
he purpose for	which the corporation is organized is:		
The purpos	e of the corporation is to conduct	any lawful purpose or pur	poses.
	CHADEC		
ARTICLE IV The number of sh	nares of stock is: 100		
ARTICLE V	INITIAL OFFICERS AND/OR DIRE	CTORS	
Name and	Title: Tori T. Duong, President	Name and Title:	,
Address:	391 Misty Meadow Dr.	Address:	
	Ocoee, FL 34761		
Name and	Title		
Address:	Title:	Address:	
Name and	Title:		
Address:		Address:	
RTICLE VI	REGISTERED AGENT	-	
	lorida street address (P.O. Box NOT accepta	able) of the registered agent is:	\
Name:	Tori T. Duong		
Address:	391 Misty Meadow Dr. Ocoee_FL 34761		
	CAUCE, FL 34701		
	<u>INCORPORATOR</u>		The state of the s
	idress of the Incorporator is:		
Name: Address:	Tori T. Duong		
Addiess.	391 Misty Meadow Dr. Ocoee, FL 34761	·	
aving been nan	ned as registered agent to accept service of p	process for the above stated corne	pration at the place designated
is certificate, I d	am familiar with and accept the appointment	as registered agent and agree to a	ct in this capacity
	Doub war		C-02-11
	Required Signature/Registered Agen	nt	Date
submit this doc	ument and affirm that the facts stated here	in are true. I am aware that the	false information submitted in
ocument to the l	Department of State constitutes a third degree	e felony as provided for in s.817.15	55, F.S.
	1.1111		5.23-11 Date