# P12000051836

(Requestor's Name)			
(Address)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Conjusión			





000235794770

06/04/12--01043--010 \*\*113.75

BIZ JUN -5 AH IO: I

J. SAULSBERRY EXAMINER JUN 6 2012

# **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ	ECT: NEW KIM BO RE	STAURANT, INC	35.00.00	
		Name of Resulting Florida	Profit Corporation	
	nclosed Certificate of Conv or Business Entity" into a "F			
Please	e return all correspondence	concerning this matter t	lo:	٠
QING	JIN LU			
	Contact Per	son		
	Firm/Comp			
	·	•	·	
<u>5675</u>	N ATLANTIC AVENUE, S			
	Address	;		· _4
coc	OA BEACH, FL 32931			2912 SEC FÁLL
	City, State and 2	Zip Code		2012 JUN - SECRETÀR ALL AHASS
E	-mail address: (to be used for fut	ure annual report notificatio	<del>n)</del>	MC M
	rther information concerning	·		AM 10: 12  AM 10: 12  FSTATE FLORIDA
QING	JIN LU	at ( 321	) 868-0188	
	Name of Centact Person	Area Code	and Daytime Telephone Nur	mber
Enclo	sed is a check for the follow	ving amount:		
<b>5</b> 10	5.00 Filing Fees	iling Fees	ling Fees \$122.50 Filing	g Fees.

and Certified Copy

# STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

and Certificate of

Status

Certified Copy, and

Certificate of Status

MAILING ADDRESS:
Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

## **Certificate of Conversion**

For

# "Other Business Entity"

Into

# Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
NEW KIM BO RESTAURANT, LLC.
Enter Name of Other Business Entity
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
NEW KIM BO RESTAURANT, LLC.  Enter Name of Other Business Entity  2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY  (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
on 11/16/2010 (Enter state, or if a non-U.S. entity, the name of the country)
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the law of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> :  NEW KIM BO RESTAURANT, INC.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:  (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)  6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the
<ul><li>7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is</li></ul>

currently organized, formed or incorporated.

Signed this 30TH day of MAY	. 20_ <b>2012</b>		
Required Signature for Florida Profit Corpora Individual signing affirms that the facts stated in t a third degree felony as provided for in s.817.155	his document are true. Any false inform	ation constitutes	
Signature of Chairman, Vice Chairman, Director, selected, an Incorporator:  Printed Name: QING JIN LU  Title:	Officer, or, if Directors or Officers have PRESIDENT	not been	
Required Signature(s) on behalf of Other Busines stated in this document are true. Any false informs s.817.155, F.S. [See below for required signature(s)	ntion constitutes a third degree felony as	) that the facts is provided for in	
Signature: Printed Name: QING IN LU	Title: MANAGING MEMBER		
Signature: Printed Name:	Title:		
Signature: Printed Name:	Title:	TA: 2	
Signature:Printed Name:	Title:	2012 JUN -5 SECRETÄRY ALLAHASSE	mental have
Signature: Printed Name:		-5 A≯ ÀRYOF- SSEE.F	
Signature: Printed Name:	Title:	-5 AH 10: 12 YRY OF STATE SSEE. FLORIDA	10
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	-	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:		
If Florida Limited Liability Company: Signature of a Member or Authorized Representative			
All others: Signature of an authorized person.			
Fees:  Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)		

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the co.	rporation shall be: NFW KII	M BO RESTAUR	RANT. INC.
	PRINCIPAL OFFICE		J,
ANTICLL II	Principal street address	Mailing addres	s, if different is:
5675 N A	TLANTIC AVE, SUITE 116	5675 NATLANTIC AVE, SU	
***************************************	EACH, FL 32931	COCOA BEACH, FL 32931	
***************************************			
ARTICLE III			
The purpose for wl	high the corporation is organized is:		
$\mathbf{A} \mathbf{K} \mathbf{I} \mathbf{V}$		AMELII DII	CINIECC
AIVI	AND ALL L	AWFUL BU	OINEOO
ARTICLE IV	SHARES		
The number of shar			
	100000		
ARTICLE V	INITIAL OFFICERS AND/OR DI	RECTORS	
	1]e; QING JENLU, P.D. , Pres.		
Address:	5675 N ATLANTIC AVE., SUITE 118	Address:	
	COCOA BEACH, FL 32931		
			<del></del>
Nonco and Tile	fl.ss - '	Name and Title:	
Address:	He.	Address:	
Address;		Address.	<u> </u>
Name and Tit	tle:	Name and Title:	
Address:		Address:	2 -
1100114501			2
ARTICLE VI	REGISTERED AGENT		
	<mark>rida street address</mark> (P.O. Box <b>NOT</b> acce	eptable) of the registered agent is:	
Name:	CING 'IN FO		
Address:	5675 NATLANTIC AVENUE, SUITE 118		
	COCOA BEACH, FL 32931	<del></del>	
A F3/T3 (** 17 1/F)	MCODDODATOD		
	INCORPORATOR		
ne <u>name and add</u> Name:	ress of the Incorporator is:		
	QING JIN LU	***************************************	
Address:	5675 N ATLANTIC AVE., SUITE 118 COCOA BEACH,FL 32931		
	COCOMBECCATE SESSI		
Havina haan nama	Walledistored amont to accout sprice	of process for the above stated corporatio	n at the place designated in
		ent as registered agent and agree to act in	
		and the second s	
/ (	HA I	05/30/2012	
<del>/::/</del>			
Godin	red Signature/Register Agent	Date	
l submit this does	ment and affirm that the flicts stated b.	erein are true. I am aware that any false	information submitted in a
locument to the De	partment of Soute constitutes a third do	gree felony as provided for in s.817.155, F.	S.
// www.me be	granding of the constitution of the constitution	ge and governor was ger or remain gove the developed of the	
//	41/	05/30/2012	
/ 🗸	N / A		
Require	ed Signatore/Incompliator	Date	

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME	MADO DECEMBE	ANT INC
The name of the cor	rporation shall be: <b>NEW KI</b>	M BO RESTAUR	KANT, INC.
ARTICLE II	<u>PRINCIPAL OFFICE</u>		•
FOTE N A	Principal street address	•	s, if different is:
• • • • • • • • • • • • • • • • • • • •	TLANTIC AVE, SUITE 116 EACH, FL 32931	5675 N ATLANTIC AVE, SUI COCOA BEACH, FL 32931	TE 116
	-ACH, FL 32931		
A FACTOR OF YOUR	Burnocki.		The second secon
The number for uch	PURPUSE  iich the corporation is organized is:		
The purpose for wi	ben the corporation is organized is.		
A N 13 /	A N I D A D I B		0111700
ANY	AND ALL I	AWFUL BU	SINESS
, ,, , ,			
ARTICLE IV			
The number of share	es of stock is: 100000		
ARTICIF V	<u>INITIAL OFFICERS AND/OR DI</u>	DECTORS	
		Name and Title:	
Address:	5675 N ATLANTIC AVE., SUITE 118		5.02
	COCOA BEACH, FL 32931		<u> </u>
· Name and Tit	le:	Name and Title:	D-1 3Z
Address:		Address:	र्रेङ्ग ता ।
			CO P7
Name and Tit	le:	Name and Title:	
Address:			
			<u> </u>
	REGISTERED AGENT		
	ida street address (P.O. Box NOT acc	eptable) of the registered agent is:	
Name: Address:	QING JIN LU 5675 N ATLANTIC AVENUE, SUITE 116	Total Service Control of the Control	
11001035.	COCOA BEACH, FL 32931	······································	
	INCORPORATOR		
Name:	ess of the Incorporator is:		
Address:	5875 NATLANTIC AVE., SUITE 118	<del></del>	
	COCOA BEACH,FL 32931		
Company to the second	,		
his certificate Vari	Lus registereo igeni to accept service familiar vitivand accept be appointe	of process for the above stated corporation tent as registered agent and agree to act in t	t at the place designated in
		em as registeren agent and agree to act in i	нь сириску
19	D for	05/30/2012	
Require	ed Signature/Registered Agent	Date	
	_		
SUDBULTHIS (LOCKING)	vent and affirm that the facts stated he	erein are true. I am aware that any fulse i gree felony as provided for in s.817.155, F.S	nformation submitted in a
wanten wine the	···· ingra vi piute konstitutes apritra aeț	gree Jeiony as provinca for in \$.617.155, F.S	<b>).</b>
/(	to be dry	05/30/2012	
Keonireo	d Signature/Incorporator	Date	