## P130000/1038

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
		MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status <u>.</u>
Special Instructions to	Filing Officer:	



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## **COVER LETTER**

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

1. I

SUBJECT:

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

<b>3</b> \$78.75	<b>\$</b> 87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
	Status

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ADDITIONAL COPY REQUIRED

uoith Name (Printed or typed) FROM: chen Hd South B-8 Address 33773. City, State & Zip elephone number notification)

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

		RTICLES OF INCOR with Chapter 607 and/or		S. (Profit)	
ARTICLE I	-4	GN MAN	••••••	Ring	The
<u>ARTICLE II F</u>	PRINCIPAL OFFICE Principal <u>street</u> address BOKHEN RK	s <u>D South</u>	N. 128 :		s, if different is: Her Rd
<u>B-8</u> LANGO	Fl. 3373	3.	B-8 L#	ARGO	Fla 33-
	URPOSE ch the corporation is organ 255.	ized is: <u>ANY</u>	AND	ALL	LAWFO
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ARTICLE IV S	HARES 1				
ARTICLE IV S The number of shares	s of stock is: 2	50			
The number of shares		50 id/or directors		2	
The number of shares	s of stock is: <u> </u>	1/2-	Name and Title:_	Pres	
The number of share: ARTICLE V I	s of stock is: <u>2</u> <b>NITIAL OFFICERS AN</b> Fitle: <u>JUDPH</u> <u>12855</u>	u Iloa Bekhen Rd	Address: _	355	i Bent we 1360
The number of share: ARTICLE V I Name and 7	s of stock is: <u>2</u> <u>NITIAL OFFICERS AN</u> Fitle: <u>JUDPH</u> <u>12855</u> <u>5007</u> <u>5007</u> <u>12855</u>	ulloa	Address: _	355	i Bent
The number of share: <u>ARTICLE V I</u> Name and T Address	s of stock is: <u>LANGO FI</u>	<u>u Iloa</u> Bekhen Rd B-8 2 33773	Address:	35 5 Níam	i Bent ul 136 ( i fla 3
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Name and Title:	 		Name and Title:	- TALLABASSEE, FLOREA-
Address	 	<u> </u>	Address:	
<del></del>	•		·	

## ARTICLE VI REGISTERED AGENT

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

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Address:

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1285	-5 B	elche	?R	RD
South				_

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Name: Couth Inn Address:

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 adcept the approximate as registered agent and agree to act in this capacity

0 Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a thjrd degree felony as provided for in s.817.155, F.S.

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ature/Incorporator Required Sign