## P1300036980

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

Office Use Only



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04/23/13--01007--012 \*\*87.50

13 APR 23 PM 2: 00

SECRETARY OF STATE

PS 4/24/13

## **COVER LETTER**

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

SUBJECT: Y	HI WESTLAND,		
	(PROPOSED CORPORA	ATE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the art	ticles of incorporation and	i 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
		ADDITIONAL COPY REQUIRED	
FROM: _	ee Kuns, CPA	e (Printed or typed)	
9	45 E Central Ave	<b>}</b>	
N	liamisburg, Ohio		
9	37-847-8373	State & Zip	
<u>d</u>	ee.changillettekunso	Celephone number  Cpas@gmail.con  Ed for future annual report i	

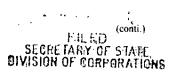
NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

The name of the corporation shall be: YIHI Westland, Inc 13 APR 23 PM 2: 00 ARTICLE II PRINCIPAL OFFICE Principal street address Mailing address, it different is: 1675 West 49th Street Chan Gillette Kuns CPAs FC-1 PO Box 317770 Hialeah, FL 33012 Cincinnati, Ohio 45231 ARTICLE III PURPOSE The purpose for which the corporation is organized is: to engage in any lawful act or activity for which a corporation may be formed in Florida ARTICLE IV SHARES
The number of shares of stock is: 1000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Xiao Gui Gao, President Name and Title: 8080 Beckett Center Dr Address Address: Suite 220 West Chester, OH 45069 Name and Title:\_\_\_\_\_\_ Name and Title:\_\_\_\_\_ Address Name and Title:\_\_\_\_\_\_ Name and Title:\_\_\_\_\_ Address \_\_ Address:



Name and Ti	tle:	Name and Title:	13 APR 23	PM 2: 00
Address		Address:		
			<del>-</del>	
ARTICLE VI R	EGISTERED AGENT			
The name and Florid	a street address (P.O. Box NOT acceptable) of	f the registered agent is:		
•	CESAR ESCALANTE	-		
Address:	1333 W. 49th. Place,	Apt. 315		
	Hialeah, FL 33012	?		
	•			
ARTICLE VII IN	ICORPORATOR			
The name and addre	ss of the Incorporator is:			
Name:	Xiao Gui Gao	_		
Address:	8080 Beckett Center Dr Ste 220	  -		
	West Chester, OH 45069			
		_		
Having been named	as registered agent to accept service of process amiliar with and accept the appointment as reg	s for the above stated corporated agent and agree i	poration at the pl to act in this capa	ace designated in city
			1	į.
x Cesar	Escalante Required Signature/Registered Agent E	<del></del>	× 4/10	113
	-			Date
I submit this docume document to the Dep	ent and affirm that the facts stated herein are artment of State constitutes a third degree felon	true. I am aware that th y as provided for in s.817	e false informatio 7.155, F.S.	on submitted in a
1 Gaox	Required Signature/Incorporator		x 4/	10/13
	Required Signature/Incorporator Gu	,o		Date