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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6381

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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FLORIDA PROFIT/NON PROFIT CORPORATION  
HAICOGREEN, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

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

**SUBJECT:** Halcogreen, Inc.  
(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:** Giao Hoang  
Name (Printed or typed)  
6607 Piemonte Drive  
Address  
Boynton Beach, FL 33472  
City, State & Zip  
(561) 412-2180  
Daytime Telephone number  
bacglao@gmail.com  
E-mail address: (to be used for future annual report notification)

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

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**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:

Hajcogreen, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address6607 Plemonte DriveBoynton Beach, FL 33472

Mailing address, if different is:

SAME**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Transacting any and all lawful business for which corporations may be  
formed under the Florida Business Corporation Act, and all amendments  
and supplements thereto, or any law enacted to take place thereof.

**ARTICLE IV SHARES**The number of shares of stock is: One thousand shares of common stock**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Giao Hoang, President

Address: 6607 Plemonte Drive  
Boynton Beach, FL 33472

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Jean Hoang, Vice President

Address: 6607 Plemonte Drive  
Boynton Beach, FL 33472

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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DIVISION OF CORPORATIONS

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(cont.)

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____
	_____		_____

**ARTICLE VI REGISTERED AGENT**

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

Name: Glao Hoang  
Address: 6607 Piemonte Drive  
Boynton Beach, FL 33472

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Glao Hoang  
Address: 6607 Piemonte Drive  
Boynton Beach, FL 33472

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

  
\_\_\_\_\_  
Required Signature of Registered Agent04-14-2014  
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 third degree felony as provided for in s.817.133, F.S.

  
\_\_\_\_\_  
Required Signature of Incorporator04-14-2014  
Date

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