

05/30/2011 10:34 PM FAX 40761435

BOX SIU

01

P14000047055

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H14000126814 3)))



H140001268143ABC.

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

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

From:

Account Name : RACHEL SIU  
Account Number : I20010000073  
Phone : (407) 679-2433  
Fax Number : (407) 671-4352

2011 MAY 30 PM 2:11

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.\*\***

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

RECEIVED

14 MAY 30 AM 11:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**August Moon, Inc. of Hollywood**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

**COVER LETTER**

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

**SUBJECT: August Moon, Inc. of Hollywood**

(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: Rachel Siu**

Name (Printed or typed)

**5100 Old Howell Branch Road**

Address

**Winter Park, FL 32792**

City, State & Zip

**407-679-2433**

Daytime Telephone number

**siucpa@gmail.com**

E-mail address: (to be used for future annual report notification)

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2014 MAY 30 PM 2:11

## 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:

August Moon, Inc. of Hollywood**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

1301 N. Federal HwyHollywood, FL 33020**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

to transact any and all lawful businessfor which corporations may be incorporated under the Florida General Corporation Act.**ARTICLE IV SHARES**

The number of shares of stock is:

1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:

Xing Zheng Zheng, p

Name and Title:

Address:

1301 N Federal Hwy

Address:

Hollywood, FL 33020

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

F.L.D.  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2314 MAY 30 PM 2:11

(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: Xing Zheng Zheng  
Address: 1301 N Federal Hwy  
Hollywood, FL 33020

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Xing Zheng Zheng  
Address: 1301 N Federal Hwy  
Hollywood, FL 33020

*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*

x 242/VG XING 242/VG 5/29/14  
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 third degree felony as provided for in s.817.155, F.S.*

4 242/VG XING 242/VG 5/29/14  
Required Signature/Incorporator Date