

P/4000063531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

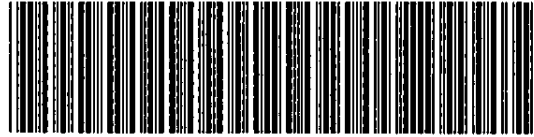
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200262245252

07/28/14--01024--005 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE FL 32399-0000

14 JUL 28 PM 4:58

APPROVAL  
AND  
FILED

11/4

## COVER LETTER

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

SUBJECT: **AUSTIN-CIAN 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: **JOSEPH CIAN**

Name (Printed or typed)

**9360 SUNRISE LAKES BLVD.**

Address

**SUNRISE, FL 33322**

City, State & Zip

**239-292-0446**

Daytime Telephone number

**JOECIAN777@GMAIL.COM**

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

**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)

APPROVED  
AND  
FILED

**ARTICLE I NAME**

The name of the corporation shall be: AUSTIN-CIAN REALTY INC.

14 JUL 28 PM 4:58

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

9360 SUNRISE LAKES BLVD

#304

SUNRISE, FL 33322

Mailing address, if different is:  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: FORMING A REAL ESTATE BROKERAGE OFFICE.

CONDUCT REAL ESTATE TRANS ACTIONS FOR BUYERS AND SELLERS, BOTH RESIDENTIAL AND COMMERCIAL

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: CAROL KONG, PRESIDENT

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

Address 9360 SUNRISE LAKES BLVD

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

#304

SUNRISE, FL 33322

Name and Title: JOE CIAN, SEC-TRESURER

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

Address 9360 SUNRISE LAKES BLVD

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

#304

SUNRISE, FL 33322

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

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

APPROVED  
AND  
FILED

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: 14 JUL 28 PM 4:58  
Address: \_\_\_\_\_ Address: SECRETARY OF STATE  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

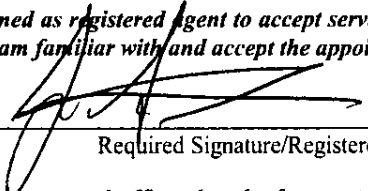
Name: JOE CIAN  
Address: 9360 SUNRISE LAKES BLVD #304  
SUNRISE, FL 33322

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

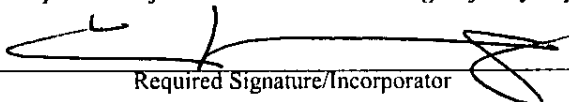
Name: CAROL KONG  
Address: 9360 SUNRISE LAKES BLVD #304  
SUNRISE, FL 33322

*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/Registered Agent

7/20/14  
\_\_\_\_\_  
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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

7/20/14  
\_\_\_\_\_  
Date