## PISOUDOMORG

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Special Instructions to Filing Officer:			
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Office Use Only



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SEGRETARY OF STATE

## **COVER LETTER**

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

SUBJECT: FLY	J WESTLAND,	INC.	
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
□ \$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of Status
		ADDITIONAL CO	
1.1	A L L INI		
FROM: 🗖	AI LIN		
	Nam	e (Printed or typed)	
80	080 Beckett Cen	ter Dr., Suite	220
	<del></del>	Address	<del>, ,</del>
W	est Chester, Ol	H 45069	
<del></del>	City	, State & Zip	
5′	13-587-9277		
<del></del>	Daytime 1	Telephone number	<del></del>

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

hlin@globalcuisineus.com
E-mail address: (to be used for future annual report notification)

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

ARTICLE II PI	RINCIPAL OFFICE							
Principal street address 1675 West 49th Street FC - 1 Hialeah, FL 33012		Mailing add	ress, if different is:					
		8080 Beckett Center Dr. Suite 220 West Chester, OH 45069						
					ARTICLE III PU	RPOSE	<del>-</del>	
					• •	the corporation is organized is:	1-1-1	•
	any lawful act or activity for	which a corporat	ion may be					
formed in Flo	orida.							
	<del></del>	<u> </u>						
	· · · · · · · · · · · · · · · · · · ·							
ARTICLE IV SI	IARES 1,000		, ,,,,,					
ARTICLE IV SP The number of shares	IARES 1,000							
ARTICLE V IN	ITIAL OFFICERS AND/OR DIRECTOR		TAL SE					
ARTICLE V IN	ITIAL OFFICERS AND/OR DIRECTOR tle: JIE LIN, President	Name and Title:	15 JAI SECHE TALLAF					
ARTICLE V IN	ITIAL OFFICERS AND/OR DIRECTOR tle: JIE LIN, President 1333 West 49th Place		75 JAN -5 SECHE IVI TALLAHASS					
ARTICLE V IN	TTIAL OFFICERS AND/OR DIRECTOR tle: JIE LIN, President 1333 West 49th Place Apt. # 220	Name and Title:	SSE J					
ARTICLE V IN	ITIAL OFFICERS AND/OR DIRECTOR tle: JIE LIN, President 1333 West 49th Place	Name and Title:	SSE J					
Name and Ti	TTIAL OFFICERS AND/OR DIRECTOR 1333 West 49th Place Apt. # 220 Hialeah, FL 33012	Name and Title:	-5 PH 1:3					
Name and Ti Address  Name and Tit	TTIAL OFFICERS AND/OR DIRECTOR  1333 West 49th Place  Apt. # 220  Hialeah, FL 33012  HAI LIN, Secretary/Treasurer	Name and Title:  Address:  Name and Title:	-5 PH 1:3					
Name and Ti	TTIAL OFFICERS AND/OR DIRECTOR  1333 West 49th Place  Apt. # 220  Hialeah, FL 33012  HAI LIN, Secretary/Treasurer  8080 Beckett Center Dr.	Name and Title:	-5 PH 1:3					
Name and Ti Address  Name and Tit	TTIAL OFFICERS AND/OR DIRECTOR  1333 West 49th Place Apt. # 220 Hialeah, FL 33012  HAI LIN, Secretary/Treasurer  8080 Beckett Center Dr.  Suite 220	Name and Title:  Address:  Name and Title:	-5 PH 1:3					
Name and Ti Address  Name and Tit	TTIAL OFFICERS AND/OR DIRECTOR  1333 West 49th Place  Apt. # 220  Hialeah, FL 33012  HAI LIN, Secretary/Treasurer  8080 Beckett Center Dr.	Name and Title:  Address:  Name and Title:	-5 PH 1:3					
Name and Ti Address  Name and Tit Address	TTIAL OFFICERS AND/OR DIRECTOR  1333 West 49th Place  Apt. # 220  Hialeah, FL 33012  HAI LIN, Secretary/Treasurer  8080 Beckett Center Dr.  Suite 220  West Chester, OH 45069	Name and Title:  Address:  Name and Title:  Address:	-5 PM 1:39					
Name and Ti Address  Name and Tit Address	TTIAL OFFICERS AND/OR DIRECTOR  1333 West 49th Place Apt. # 220 Hialeah, FL 33012  HAI LIN, Secretary/Treasurer  8080 Beckett Center Dr.  Suite 220	Name and Title:  Address:  Name and Title:  Address:	-5 PM 1:39					

Name and	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
	orida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	JIE LIN	
Address:	1333 West 49th Place, Apt.#220	
	Hialeah, FL 33012	
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	HAI LIN	
Address:	8080 Beckett Center Dr., Suite 220	
	West Chester, OH 45069	
	ned as registered agent to accept service of process am familiar with and accept the appointment as regional Required Signature/Registered Agent	for the above stated corporation at the place designated in istered agent and agree to act in this capacity  \( \frac{12/30/14}{Date} \)
		true. I am aware that the false information sufpitted in a
document to the I	Department of State constitutes a third degree felony	true. I am aware that the false information supplitted in a sy as provided for in s.817.155, F.S.    A   A   A   A   A   A   A   A   A