

P15000054969

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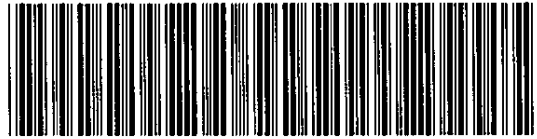
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JUN 29 2015

T. SCOTT



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RECEIVED
DEPARTMENT OF STATE
15 JUN 29 PM 1:42

15 JUN 29 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: ~~Wakame~~ WAKAME JAPANESE RESTAURANT 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: Frank Rong
Name (Printed or typed)

3116 Capital circle N.E. Suite 3
Address

Tallahassee, FL, 32308
City, State & Zip

(850) 668-4925
Daytime Telephone number

Frank@verygoodcpa.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)

ARTICLE I NAME

The name of the corporation shall be: WAKAME JAPANESE RESTAURANT, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

104 Bartram Oaks Walk
Ste #108
St. Johns FL 32259

Mailing address, if different is:

104 Bartram Oaks Walk
Ste #108
St. Johns FL 32259

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: doing all legal and lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

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STATE OF FLORIDA
TALLAHASSEE

APPROVED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sonny Chen, President

Address: 104 Bartram Oaks Walk
Ste #108
St. Johns, FL 32259

Name and Title: Jim Chen, Treasurer

Address: 104 Bartram Oaks Walk
Ste. #108
St. Johns, FL 32259

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: Frank Rong

Address: 3116 Capital Circle NE.
Ste 3, Tallahassee FL 32308

ARTICLE VII INCORPORATOR

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

Name: Sonny chen

Address: 104 Bartram Oaks Walk
Ste #108, St. Johns FL 32259

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 7/1/2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Frank Rong

Required Signature/Registered Agent

06/29/2015

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.

Sonny Chen

Required Signature/Incorporator

06/29/2015

Date