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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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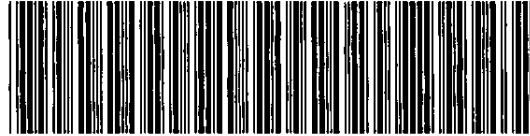
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Office Use Only

W160000 51303

AUG 24 2016

T. SCOTT



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16 AUG 15 PM 1:15

RECEIVED
FEB 10 2016
SECTION 2000/1000/0000



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 22, 2016

HCA MANDALAY CORP.
2507 MANOR DR
SEBRING, FL 33872

SUBJECT: HCA MANDALAY CORP.
Ref. Number: W16000051303

RECEIVED
16 AUG 15 PM 3:34
MAIL ROOM 11-200A

We have received your document for HCA MANDALAY CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 416A00015429

COVER LETTER

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

SUBJECT: HCA MANDALAY KEY CORP.

(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: HCA Mandalay Key Corp.
Name (printed or typed)

2507 MANOR DR
Address

SEBRING, FL 33872

City, State & Zip

215-715-3632

Daytime Telephone number

WINCM2000@YAHOO.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: HCA MANDALAY KEY CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2507 MANOR DR

SEBRING, FL 33872

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

16 AUG 15 PM 1:15

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CHO MYA MON WIN, PRESIDENT

Name and Title: CHIH MING HUANG, VICE PRESID

Address 2507 MANOR DR
SEBRING, FL 33872

Address: 2507 MANOR DR
SEBRING, FL 33872

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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: CHO MIN MON WIN
Address: 2507 MANOR DR
SEBRING, FL 33872

ARTICLE VII INCORPORATOR

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

Name: CHO MIN MON WIN
Address: 2507 MANOR DR ,
SEBRING, FL 33872

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (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

Required Signature/Registered Agent
6/4/2016
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
6/4/2016
Date