

P160000097907

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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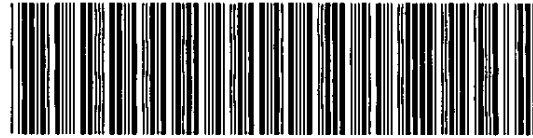
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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DEC 12 2016

COVER LETTER

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

SUBJECT: Golden Eagle Group
(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: Junwei Lu
Name (Printed or typed)
9556 Apalachee Parkway
Address
Tallahassee, Florida 32311
City, State & Zip
(850) 510-5132
Daytime Telephone number
luj303@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)

ARTICLE I NAME

The name of the corporation shall be: Golden Eagle Group Corporation

ARTICLE II PRINCIPAL OFFICE

9556 Apalachee Parkway
Tallahassee, FL 32311

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This corporation is organized as an umbrella company that covers the different branch off businesses the corporation operates. Currently, the corporation is structured to encompass three different business entities: Oasis Health Care, LLC; Sunset Bar & Grill, and Sunset Motel.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tunwei Lu, CEO

Address: 9556 Apalachee Pkwy
Tallahassee, FL 32311

Name and Title: Yuehong Yu, CFO

Address: 1876 Nicklaus Ct
Tallahassee, FL 32301

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

16 DEC 12 PM 5:07
TALLAHASSEE, FL 32301
SECRETARY OF STATE

OFFICE OF THE
ATTORNEY GENERAL
TALLAHASSEE, FL 32301

16 DEC 12 AM 5:07

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: Junwei Lu
Address: 9556 Apalachee Pkwy
Tallahassee, FL 32311

ARTICLE VII INCORPORATOR

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

Name: Junwei Lu
Address: 9556 Apalachee Pkwy
Tallahassee, FL 32311

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/01/2017 (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.)

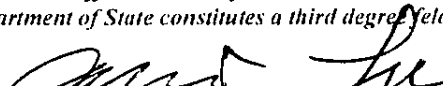
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

12/12/2016
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

12/12/2016
Date