

# P17000012969

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
SIMPLY LIM INC.**

Certificate of Status	0
Certified Copy	1
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**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: SIMPLY LIM INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1801 NW US HWY 19 STE # 519

CRYSTAL RIVER, FL 34428

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

THE GENERAL NATURE OF BUSINESS OF THIS CORPORATION IS TO TRANSACT ANY AND  
ALL LAWFUL BUSINESS.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: SENG LIM, PRESIDENT

Address: 1801 NW US HWY 19, STE # 519  
CRYSTAL RIVER, FL 34428

Name and Title: KIMBERLY NGOUN, VICE PRES

Address: 1801 NW US HWY 19, STE # 519  
CRYSTAL RIVER, FL 34428

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

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

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

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

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

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

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

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STATE  
TALLAHASSEE FLORIDA

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: KIMBERLY NGOUN  
Address: 1801 NW US HWY 19 STE # 519  
CRYSTAL RIVER, FL 34428

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TALLAHASSEE FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: FREDERICK KOEHL  
Address: 6050 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429

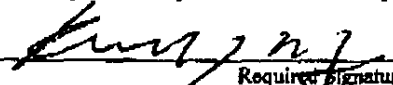
**ARTICLE VIII EFFECTIVE DATE:**

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 days prior or 90 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

02/09/2017  
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

02/09/2017  
Date

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