

P17000035648

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
NATURE GREEN SPA CORP.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

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APR 20 2017

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COVER LETTER

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

SUBJECT: Nature Green Spa 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: Yubao LIN
Name (Printed or typed)
1401 North University Drive #300
Address
Coral Springs FL 33071
City, State & Zip
954-821-5675
Daytime Telephone number
Yubao 5675@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:

Nature Green Spa Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1401 North University Drive #300 Same
Coral Springs, FL 33071

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Products + services

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Yubao Lian

Name and Title:

President

Address

1401 North University Drive
#300

Address:

Same

Coral Springs, FL 33071

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

17 APR 19 AM 11:15
RECORDED

(cont.)

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: Yubao LIN
Address: 1401 North University Drive #300
Coral Springs, FL 33071

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Yubao LIN
Address: 1401 North University Drive #300
Coral Springs, FL 33071

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.

X-YU BAO LIN
Required Signature/Registered Agent

4/18/17
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.817.133, F.S.

X-YU BAO LIN
Required Signature/Incorporator

4/18/17
Date

APR 19 AM 11:16