P180000 10810

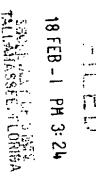
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bı	usiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





000305816150

12/19/17--01006--013 *•78.75





January 17, 2018 ·

YIN ZHANG 9045 LAFONTANA BLVD, SUITE 115 BOCA RATON, FL 33434

SUBJECT: RELAX YOUR FEET Ref. Number: W18000004413

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

You failed to make the correction(s) requested in our previous letter.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return 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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 418A00000973

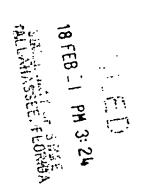


FLORIDA DEPARTMENT OF STATE Division of Corporations

December 20, 2017

YIN ZHANG 9045 LAFOUNTANA BLVD. SUITE 115 BOCA RATON, FL 33434

SUBJECT: RELAX YOUR FEET Ref. Number: W17000100325



We have received your document for RELAX YOUR FEET 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 must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return 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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 317A00025773

COVER LETTER

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

Relax Y	our Feet Corp		
30bjec 1	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles 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 o Status
		ADDITIONAL CO	PY REQUIRED
FROM:	Zhang Nam 5 LaFontana Blvd. Suite 115	e (Printed or typed)	
		Address	
boca	a raton, fl. 33434		
	City	, State & Zip	
917	2914101		
	Daytime 7	Telephone number	
аррс	ointment2008@hotmail.com		
	E-mail address: (to be use	d for future annual report i	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)

<u>ARTICLE I NAMI</u>		-Relax	Volus	Feet	Carl	n.	
The name of the corpor	ation shall be:	Reum	jour	reeu	(DY	<u>, , </u>	_
ARTICLE II PRIN	CIPAL OFFICE	麓			,		
	Principal street address	•		ailing addres		nt is:	
8903 Glades rd. Suite	A8 Boca raton, Fl. 33434		9045 lafont		te 115		
			boca raton,	fl 33434			
	<u> </u>						
ARTICLE III PURF	POSE the corporation is organized is	To purchase, sell, h	nold, own, and	d operate rea	al		
• •	ate of Florida and and all other		limited liabili	ty companie	es.		
					A. 1	18	••
					<u> </u>	<u> </u>	,
						<u> 8</u>	
					5554 1137		
	_				<u> </u>		1.1.
					5	ယ္	
					725	24	
					نتز		
ARTICLE V INIT	AL OFFICERS AND/OR DIR		ne and Title:_				
	20839 Boca Ride Dr. N						
Address	Boca raton, Fl. 33428	Add	ress:				
			_				
		.	_				
Name and Titl	c:	Nan	ne and Title:_				
Address		Add	ress:				
					-		
			_				
Name and Titl	e:	Nап	ne and Title:_				
Address		Add	ress:				

Name a	and Title:	Name and Title:	
Addres	ss	Address:	
ARTICLE VI	REGISTERED AGENT	and the continue of the continue of	
Name:	Florida street address (P.O. Box NOT accept Yin Zhang	able) of the registered agent is:	
Address:	20839 Boca Ridge Dr. N		क् <i>रा</i>
	Boca Raton, Fl. 33428		18 FE
ARTICLE VII	<u>INCORPORATOR</u>		B FEB _1
The name and	address of the Incorporator is:		72
Name:	Yin Zhang		1 3: 24 FEORIT
Address:	20839 Boca ridge dr. N		超 非 *
	boca raton, fl 33428		
ARTICI F VIII	EFFECTIVE DATE: 12/16/2017		
Effective date, i	if other than the date of filing: date is listed, the date must be specific and	. (OPTIONAL	_) prior or 98 days after
filing.)	vace is useed, the date must be specific and	cannot be more than five days	prior or 20 days after
	te inserted in this block does not meet the app effective date on the Department of State's re		ts, this date will not be
	amed as registered agent to accept service of I am familiar with and accept the appointmen		
this certificate. i			
this certificate,			12/14/2017
this certificate,	Required Signature/Registered Age	ent	Date
I submit this do	Required Signature/Registered Age ocument and affirm that the facts stated here to Department of State constitutes a third degre	ein are true. I am Aware that the	Date false information subm