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## **COVER LETTER**

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

SUBJECT: Y.I.M	1. Corp.,				
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an or	riginal and one (1) copy of the ar	ticles of incorporation an	d a check for:		
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status		
		ADDITIONAL CO	OPY REQUIRED		
FROM: _	'an Thein Min Nam	e (Printed or typed)			
75	586 Pine Lakes Blvd.,		•		
_	Address				
Po	ort Saint Lucie , FL 34952				
_	City	. State & Zip	·		
20	)5-222-8964				
_	Daytime	Felephone number	<del></del>		
nı	inyan1980@gmail.com				
	E-mail address: (to be use	ed 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)

TICLE II PRINC	Principal street address		Mailing address, if different is:
586 Pine Lakes Blvd			
rt Saint Lucie, FL 34	4952	Same	
<u> </u>			
TICLE III PURPO e purpose for which	OSE the corporation is organized is:		
king sushi boxes and	d delivery to the stores.		
			30
•			1.7
			2
TICLE IV SHAR e number of shares of	stock is:		
TICLE V INITE  Name and Title	Stock is:  AL OFFICERS AND/OR DIRECTOR  Van Thain Min. President	S Name and Tit	Van Thuin Min, Officur
e number of shares of	stock is:  AL OFFICERS AND/OR DIRECTOR  Yan Thein Min, President e:	<u>s</u>	Yan Thein Min, Officer
TICLE V INITE  Name and Title	Stock is:  AL OFFICERS AND/OR DIRECTOR  Yan Thein Min, President  7586 Pine Lakes Blvd.,	S Name and Tit	le: Yan Thein Min, Officer 7586 Pine Lakes Blvd.,
number of shares of  TICLE V INITE  Name and Titl  Address	Stock is:  AL OFFICERS AND/OR DIRECTOR  Yan Thein Min, President  7586 Pine Lakes Blvd.,	S Name and Tit Address:	Yan Thein Min, Officer 7586 Pine Lakes Blvd., Port Saint Lucie, FL 34952
number of shares of  TICLE V INITE  Name and Titl  Address	Stock is:  AL OFFICERS AND/OR DIRECTOR  Yan Thein Min, President  7586 Pine Lakes Blvd.,  Port Saint Lucie, FL 34952	Name and Tit Address:  Name and Tit	Yan Thein Min, Officer 7586 Pine Lakes Blvd., Port Saint Lucie, FL 34952
Name and Title  Name and Title	Stock is:  AL OFFICERS AND/OR DIRECTOR  Yan Thein Min, President  7586 Pine Lakes Blvd  Port Saint Lucie, FL 34952	Name and Tit Address: Name and Tit Name and Tit Address:	Port Saint Lucie, FL 34952
Name and Title  Name and Title  Address	Stock is:  AL OFFICERS AND/OR DIRECTOR  Yan Thein Min, President  7586 Pine Lakes Blvd  Port Saint Lucie, FL 34952	Name and Tit Address: Name and Tit Address: Address:	Yan Thein Min, Officer 7586 Pine Lakes Blvd., Port Saint Lucie, FL 34952
Name and Title  Name and Title  Address	Stock is:  AL OFFICERS AND/OR DIRECTOR  Yan Thein Min, President  7586 Pine Lakes Blvd  Port Saint Lucie, FL 34952	Name and Tit Address: Name and Tit Address: Address:	Yan Thein Min, Officer 7586 Pine Lakes Blvd., Port Saint Lucie, FL 34952
Name and Title  Name and Title  Address	Stock is:  AL OFFICERS AND/OR DIRECTOR  Yan Thein Min, President  7586 Pine Lakes Blvd  Port Saint Lucie, FL 34952	Name and Tit Address: Name and Tit Address: Name and Tit	Yan Thein Min, Officer 7586 Pine Lakes Blvd., Port Saint Lucie, FL 34952

Name an	d Title:	Name and Title:	<del></del>
Address		Address:	
	REGISTERED AGENT     Orida street address (P.O. Box NOT accept	able) of the registered agent is:	
Name:	Yan Thein Min		هبيد
Address:	7586 Pine Lakes Blvd		. 130 8
	Port Saint Lucie, FL 34952		: 17
ARTICLE VII	<u>INCORPORATOR</u>		PP1 2:
The name and ac	Idress of the Incorporator is:		22 22 23
Name:	Yan Thein Min		<u>;</u> .
Address:	7586 Pine Lakes Blvd.,		
	Port Saint Lucie, FL 34952		
Effective date, if	EFFECTIVE DATE: other than the date of tiling: ate is listed, the date must be specific and	. (OPTIONAL cannot be more than five days p	.) prior or 90 days after the
Note: If the date the document's e	inserted in this block does not meet the app ffective date on the Department of State's re	licable statutory filing requiremen cords.	ts, this date will not be listed as
Having been nan this certificate, I	ned as registered agent to accept service of am familiar with and accept the appointmen	process for the above stated corpo at as registered agent and agree to	oration at the place designated ir act in this capacity
	<i></i>		10 · 8 · 18
	Required Signature/Registered Age		Date
document to the	ument and affirm that the facts stated here Department of State constitutes a third degre	ein are true. I am aware that the ee felony as provided for in s.817.1	false information submitted in a 155, F.S.
÷	red Signature/Incorporator		10 · 8 · 18
Requi	red Signature Incorporator		Date