

3/20/2019

FUJIYAMA SUSHI BURRITO INC

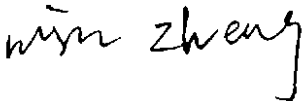
Doc. No. P17000050811

To whom it may concern,

We are no longer expect to use this company again

Sincerely

MIN ZHENG

A handwritten signature in black ink that reads "min zheng". The signature is written in a cursive style with lowercase letters.

COVER LETTER

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

SUBJECT: FUJIYAMA SUSHI BURRITO INC
(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: MIN ZHENG
Name (Printed or typed)

1117 GREBEAR CT
Address

TALLAHASSEE, FL 32311
City, State & Zip

718-715-6375
Daytime Telephone number

tara@verygoodcpa.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 FUJIYAMA SUSHI BURRITO INC
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____ Mailing address, if different is: _____

1964 W TENNESSEE ST #19 _____

TALLAHASSEE, FL 32304 _____

ARTICLE III PURPOSE ANY AND ALL LAWFUL BUSINESS.
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	MIN ZHENG (P)	Name and Title:	_____
Address	1117 GREYBEAR CT	Address:	_____
	TALLAHASSEE FL32311		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

FILED
19 APR 23 AM 10:01
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: FRANK RONG, CPA
 Address: 3116 CAPITAL CIRCLE N.E.,#3
TALLAHASSEE, FL 32308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MIN ZHENG
 Address: 1117 GREYBEAR CT
TALLAHASSEE, FL 32311

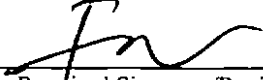
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 3/20/2019 (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

3/20/2019
 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

FILED
 APR 23 10:01 AM
 TALLAHASSEE, FLORIDA
 STATE