

*First Name: _____ Middle Initial: _____ *Last Name: _____

Phone Number: _____

Email Address: _____

*Address: _____

*City: _____ *State: _____ *Postal Code: _____

Name of Corporation: _____

Optional Opening Statement

Check if Applicable

Include following statement (not required by statute)

I, the undersigned, a natural person of at least 18 years of age, for the purpose of forming a corporation under Section 402 of the Business Corporation Law of the State of New York hereby certify:

Corporation Name

The name of the corporation is:

*Name: _____

English Translation: _____

Purposes

Standard "All-Purpose" Clause:

This corporation is formed to engage in any lawful act or activity for which a corporation may be organized under the Business Corporation Law, provided that it is not formed to engage in any act or activity requiring the consent or approval of any state official, department, board, agency or other body without such consent or approval first being obtained.

County

The county, within this state, in which the office of the corporation is to be located is:

*County: _____

Shares

The total number and value of shares of common stock which the corporation shall have authority to issue is:

*Number of Shares: _____

*Share Value: _____

*Value Per Share: _____

Tax on Shares: \$0.00

Service of Process

The Secretary of State is designated as agent of the corporation upon whom process against the corporation may be served. The address to which the Secretary of State shall mail a copy of any process accepted on behalf of the corporation is:

*Service of Process Name: _____

*Address: _____

*City: _____ *State: _____ *Postal Code: _____

Optional Registered Agent

Check if Applicable:

Include following statement (not required by statute)

The corporation designates the following as its registered agent upon whom process against it may be served within the State of New York is:

*Registered Agent Name: _____

*Address: _____

*City: _____ *State: _____ *Postal Code: _____

Optional Effective Date

Check if Applicable:

Include following statement (not required by statute)

Existence of the corporation shall begin:

*Select One

upon the filing of this Certificate of Incorporation with the Department of State

on: _____

Optional Duration Date

Check if Applicable:

Include following statement (not required by statute)

The duration of the corporation shall be:

*Select One

perpetual (will continue in existence until dissolved)

until: _____

Optional Liability Statement

Check if Applicable:

Include following statement (not required by statute)

No Director of this corporation shall be personally liable to the corporation, or its shareholders for damages for any breach of duty in such capacity, provided that this provision shall not limit the liability of any director if a judgment or other final adjudication, adverse to him, establishes that his act or omissions were in bad faith or involved intentional misconduct or a knowing violation of law or that he personally gained in fact a financial profit or other advantage, to which he was not legally entitled or that his acts violated Section 719 of the New York Business Corporation Law.

Optional Preemptive Rights Statement

Check if Applicable:

Include following statement (not required by statute)

The holders of any of the corporation's equity shares shall be entitled to preemptive rights in accordance with the provisions of BCL section 622.

Incorporator

*First Name: _____ Middle Initial: _____ *Last Name: _____

*Address: _____ SOP Address

*City: _____ *State: _____ *Postal Code: _____

Signature

I certify that I have read the above statements, I am authorized to sign this Certificate of Incorporation, that the above statements are true and correct to the best of my knowledge and belief and that my signature typed below constitutes my signature.

*Signature of Incorporator: _____

Filer

Filer Name: _____

*Address: _____ SOP Address Incorporator Address

*City: _____ *State: _____ *Postal Code: _____