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SECRETARY OF STATE TALLAHASSEE FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Katzkin Leather Inc.
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Angelica Maciel, Accounting Manager Name of Person
Name of Person
Katzkin Leather Inc
Firm/Company
108108 Acco ST
Address
Montebello OA 90640
City/State and Zin code
a maciel a kutzkin, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Angelica Maciel at (323) 725-1243 ext 108 Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
S70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607. 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. KATZKIN LEATHEN INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp.")

(If name unswellable in Florida, enter ulternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware
(State or country under the law of which it is incorporated)

(State or country under the law of which it is incorporated)

(Date of duration, if other than perpetual)

(Date of incorporation)

(Date of duration, if other than perpetual)

(Date of incorporation)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. WELLS ACCOUNT MATHLES OF (Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Curracy

Office Address: 1201 Hays St.

TAllahassee, Florida 30301

(City)

(Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Directer Brooks Mayherry
Address: 68188 ACCO St Montehello CA 9040
Director TIMOMY S. Clyde
Address: COSCO ST MENTENELLO CA 90040
Director: PETEN Y. KIM
Address: 10868 ACCO ST MWHERONO CM 90640
Director: MICHAEL S. KAYE
Address: Lesus Aclo St Muntehello CA 90640
B. OFFICERS
Address: 10808 ACCO St Woutehallo CA 90040
Vice President: Peter Y KIM - VICE President, Secretary, Treasure Address: LOS LOS ACCO ST MUNTERALO OF 901940
Mairman Brook Wayherry
Address: 18868 ACCO ST WONTENELLO CA 901040
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.
13. Books K. Mayberry, Chairman
(Typed or printed name and capacity of person signing application)

ADDENDUM TO APPLICATION

11. Name and business addresses of officers and/or directors:

A. DIRECTORS

Director:

Joseph J. Schimdt

Address:

6868 Acco St., Montebello CA 90640

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KATZKIN LEATHER, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF MARCH, A.D. 2018.



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Date: 03-01-18