POODOOOS4772 TRANSMITTAL LETTER ELESTICATION SERVICES AND BEST OF THE POOD OF

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

SUBJECT: Bill's Shoe & Luggage Repair Salon, Inc.

500003381555---¹ -09/05/00--01078--016 ******78.75 ******78.75

(Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$131.25 \$122.50 X \$78.75 \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee & Certified Copy **Certified Copy** & Certificate & Certificate Additional Copy Required James A, Mandeville FROM: Name (printed or typed) 4897 Jaybird Circle N. Address Jacksonville, FL 32257 City, State & Zip (904) 905-4947 Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Bill's Shoe & Luggage Repair Salon, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

113 West Adams Street Jacksonville, FL 32202



ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

James A. Mandeville 4897 Jaybird Circle N. Jacksonville, FL 32257

ARTICLE V INCORPORATOR(S) See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

James Mandeville 4897 Jaybird Circle North Jacksonville, FL 32257

Denise T. Mandeville 4897 Jaybird Circle North Jacksonville, FL 32257

Daren L. Donovan 7986 Cherry Blossom Drive S. Jacksonville, FL 32216

The unders	igned incorpora	ator(s) nas(nave)	exec	uted these Articles o	or incorporation this
31st	day of	August		2000	-
The effectiv	ve date of incor	poration request	eu	September 1, 2000.	-
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				nature	
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Notarization is not required

Note: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Bill's Shoe & Luggage Repair Salon, Inc.

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporations is:

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1. The name and address of the registered agent and of	fice is:
James A. Mandey	/ille
NAME	The state of the s
4897 Jaybird Circle	N.
P. O. Box or Mail Drop Box NOT AC	
Jacksonville, FL 32	257
(CITY/STATE/ZIP)	P
Having been named as registered agent and to acce, corporation at the place designated in this certificate, I is agent and agree to act in this capacity. I further agree relating to the proper and complete performance of my cobligations of my position as registered agent.	te semale with the appointment as registered
(SIGNATURE)	09/01/00 (DATE)