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ERESA ROMAN (TALLAHASSEE REPRESENTATIVE)	OFFICE USE ONLY
CORPORATION NAME(S) & DOCUMENT NUMBER	BER(S) (if known):
1. HIDES & SHEEPSKI	V INC. SECRETIARY ALLAHASSE
(Corporation Name)	(Document#) ASSET (Document#)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
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ARTICLES OF INCORPORATION 01 MAY -9 PM 3:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:

HIDES & SHEEPSKIN, INC.

ARTICLE II PRINCIPAL OFFICE

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

8143 NW 12TH STREET CORAL SPRINGS, FL 33071

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GERHARD SCHILLINGER 8143 NW 12TH STREET CORAL SPRINGS, FL 33071

ARTICLE V INCORPORATOR(S)

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

GERHARD SCHILLINGER 8143 NW 12TH STREET CORAL SPRINGS, FL 33071

ARTICLE VI DIRECTOR(S)

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

GERHARD SCHILLINGER, PRESIDENT 8143 NW 12TH STREET CORAL SPRINGS, FL 33071

The undersigned indincorporation this _			,x ts 2001
:	× fen	6	
	× 100	Signature	
	<u> </u>	Signature	•
		Signature	

Articles of Incorporation Filing Fee - \$35

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes STATE 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.

he name and address of the re	gistered agent and office is:
GERHARD SCHILLINGER	· · · · · · · · · · · · · · · · · · ·
(NAME)
8143 NW 12TH STREET	
(P.O. BOX N	OT ACCEPTABLE)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE S/07/01

REGISTERED AGENT FILING FEE: \$35.00