

TRANSMITTAL LETTER

PO1000116339

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

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*****78.75 *****78.75

KILLER BOOTS, INC.

SUBJECT: _____
(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

Envelope Enclosed for Return of Copy.

Thane, [Signature]

FROM: Michael A. Haber, Esq.
Name (Printed or typed)

1 NE 2 Ave # 200

Address

Miami, FL 33132

City, State & Zip

305/381-8686.

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2001 DEC - 7 PM 3:26

FILED

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

FILED

ARTICLES OF INCORPORATION for 2001 DEC -7 PM 3:26

KILLER BOOTS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I.

CORPORATE NAME

The name of the corporation is: *Killer Boots, Inc.*

ARTICLE II.

CORPORATE OFFICE

The address of the principal place of business of the corporation and the mailing address of the corporation is:
One Northeast 2nd Avenue, Suite # 200, Miami, Florida 33132

ARTICLE III.

PURPOSE

The purpose for which the corporation is organized is: *Internet marketing and sales.*

ARTICLE IV.

CAPITAL STOCK

The capital stock authorized, the par value thereof, and the class of such stock shall be as follows:

Number of Shares	Authorized	Par Value Per Share	Class of Stock
<i>1,000</i>	<i>1,000</i>	<i>\$ 1.00</i>	<i>Common</i>

ARTICLE V.

PREEMPTIVE RIGHTS

Each shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as to that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI.

INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The corporation's initial Registered Agent and Registered office in the State of Florida are:

INITIAL REGISTERED AGENT: *Michael A. Haber, Esq.*

INITIAL REGISTERED OFFICE: *One Northeast 2nd Avenue, Suite # 200, Miami, Florida 33132*

ARTICLE VII.

INCORPORATOR

The name and address of each Incorporator executing these Articles of Incorporation is:

NAME: ADDRESS:

Michael A. Haber, Esq.

One Northeast 2nd Avenue, Suite # 200, Miami, Florida 33132

ARTICLE VIII.

INITIAL OFFICERS and DIRECTORS

The names, addresses and titles of the initial officers and directors are:

NAME:	ADDRESS:	TITLE:
<i>Joseph A. Haber</i>	<i>One Northeast 2nd Avenue, Suite # 200, Miami, Florida 33132</i>	<i>President</i>
<i>Michael A. Haber</i>	<i>One Northeast 2nd Avenue, Suite # 200, Miami, Florida 33132</i>	<i>Vice-President</i>

ARTICLE IX.

BY-LAWS

The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors and the shareholders.

ARTICLE X.

INDEMNIFICATION

The corporation shall indemnify any officer or director or any former officer or director to the fullest extent permitted by law.

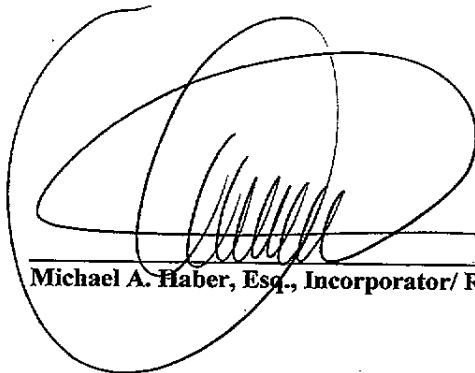
ARTICLE XI.

AMENDMENTS

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation or any amendment thereto and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF the undersigned incorporator has executed these Articles of Incorporation and further avers that *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.*

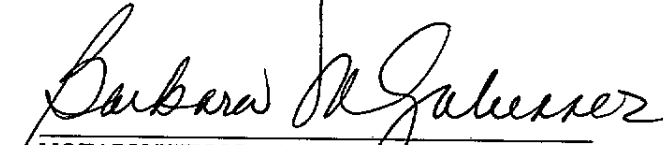
Dated: November 26th, 2001



Michael A. Haber, Esq., Incorporator/ Registered Agent

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me on November 26th, 2001 by MICHAEL A. HABER.



NOTARY PUBLIC—STATE OF FLORIDA



Barbara M. Gutierrez
MY COMMISSION # CC965978 EXPIRES
September 6, 2004
BONDED THRU TROY FAIN INSURANCE, INC.

[Print, type, or stamp commissioned name of notary]

[☒ one only]

☒ Personally known

☐ Produced identification

Type of identification produced _____