## Certified Public Accountants and Consultants

# P02000046220

13450 West Sunrise Boulevard, Suite 150 Fort Lauderdale, Florida 33323

Broward: 954.845.1175 Dade: 305.944.0172 Paim Bch.: 561.392.2595 Fax: 954.845.1185 www.poolegoldstein.com

April 9, 2002

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

Re: Bikers Depot, Inc.

000005326330--7 -04/23/02--01046--011 \*\*\*\*\*122.50 \*\*\*\*\*\*78.75

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with a check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Sincerely,

Dee Dee Rinaldi, C.P.A.

SECRETARY OF STATE TALLAHASSEE, FLORIDA



#### ARTICLES OF INCORPORATION

of	TALLAHASSEE, FLURIDA
Bikers Depot, Inc.	02 APR 23 PM 3: 40
(name of corporation)	<u> </u>

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTIC	LE I - CORPORATE NAME	
The name of the corporation is:	•	
I	Bikers Depot, Inc.	
	•	
AF	RTICLE II - DURATION	
This corporation shall exist perpetually unless d	issolved according to Florida law.	
Al	RTICLE III - PURPOSE	
The corporation is organized for the purpose of United States and the State of Florida.	engaging in any activities or business	permitted under the laws of the
ARTIC	CLE IV - CAPITAL STOCK	
The corporation is authorized to issue500	shares of common stock, par value	e \$ _1.00 per share.
The street address of the initial principal office a		s:
STREET ADDRESS 6690 S.W. 6th St	reet	
CITY Margate	FLORIDA	ZIP 33068
Mailing address, if different		
STREET ADDRESS		
CITY	FLORIDA	ZIP
ARTICLE VI - INITIA	AL REGISTERED OFFICE AND A	AGENT
The street address of the initial registered of	ffice and the name of the initial re	gistered agent at the office is:
NAME Kenneth Cannato	,	
ADDRESS		-
CITY Margate	FLORIDA	ZIP 33068

#### ARTICLE VII - INITIAL BOARD OF DIRECTORS

<u> </u>	Two	(2	_) directors	initially. The number	of directors may be
either increased or diminished from ti	me to time by the l	By-Laws, bu	t shall never	be less than one (1).	The names and
addresses of the initial director(s) of t	he corporation are	as follows:		\-,-	

NAME	Kenneth Cannato		
ADDRESS	6690 S.W. 6th Street		
CITY	Margate	STATE FL	ZIP 33068
NAME	Brian Doherty		
ADDRESS	6690 S.W. 6th Street		
CITY	Margate	STATE FL	ZIP 33068
NAME			
ADDRESS			
CITY		STATE	ZIP

#### ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Kenneth Cannato	_	
ADDRESS	6690 S.W. 6th Street		
CITY	Margate	STATE <sub>FL</sub>	ZIP 33068
NAME	Brian Doherty		
ADDRESS	6690 S.W. 6th Street		
CITY	Margate	STATE <sub>FL</sub>	ZIP <sub>33068</sub>
NAME			
ADDRESS			
CITY	·	STATE	ZIP

CITY	STATE	ZIP
The undersigned incorporator(s) have execute day of	have executed these Articles of Incorporation this  Associated these Articles of Incorporation this  Associated these Articles of Incorporation this  But W Dorothy	(Signature) (Signature)
		(Signature)

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

02 APR 23 PM 3: 40

Bikers Depot, Inc.
(name of corporation)
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation
at 6690 S.W. 6th Street
Margate, FL 33060
has named Kenneth Cannato
located at the aforesaid address, as its registered agent to accept service of process within this

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)

(Date)

state.