

P02000121993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

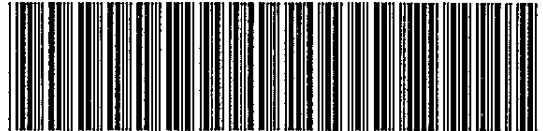
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE  
01-01-03

g 11/12

## TRANSMITTAL LETTER

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

SUBJECT: Sunrise Leather, Inc.

(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**

**EFFECTIVE DATE**  
01-01-01

FROM: Irene M. Graziosi

Name (Printed or typed)

1640 Field Road

Address

Sarasota, FL 34231

City, State & Zip

941-927-2544

Daytime Telephone number

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

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### ARTICLE I NAME

The name of the corporation shall be:

Sunrise Leather, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1640 Field Road  
Sarasota, FL 34231

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct business

### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Irene M. Graziosi, President & CEO  
1640 Field Road  
Sarasota, FL 34231

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Irene M. Graziosi  
1640 Field Road  
Sarasota, FL 34231

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Irene M. Graziosi, 1640 Field Road, Sarasota, FL 34231

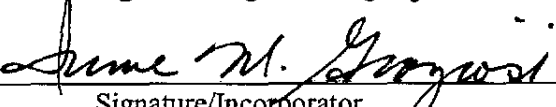
ARTICLE VIII EFFECTIVE DATE: 1/1/03

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Signature/Registered Agent

11/06/02

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11/06/02

\_\_\_\_\_  
Date

FILED  
02 NOV 12 AM 9:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE  
01-01-03