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## TRANSMITTAL LETTER

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

SUBJECT:	Leother Expe	TE NAME - MUST INCL	
	(PROPOSED CORÇORA	ie name – <u>must incl</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation and	l a check for:
□ \$70.00	\$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
_	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of Status
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FROM:	Jenniter WAI		Jens -
	Name	(Printed or typed)	
	816 Ame	thyst Way	,
	Valvice City,	F1. 335 State & Zip	594
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NOTE: Please provide the original and one copy of the articles.

## FILED ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) 03 DEC -8 AHII: 17 ARTICLE I NAME The name of the corporation shall be: SECRETART OF STATE TALLAHASSEE, FLORIDA Leather Experts Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 600 Victory Garden Dr. Apt. 656 Tollahassee Fl. 32301 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Leather Repair 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): Jennifer Waller - President Michael Freedman-Vice President Tallahassee Fl. 32301 REGISTERED AGENT The name and Florida street address of the registered agent is: Waller. 600 Victory Garden Dr. Apr. 656 Tallahassec Fl 32301 INCORPORATOR ARTICLE VII The name and address of the Incorporator is: GOO Vickey Garden Dr. Apt. 656 Tallahassec Fl 32301 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

Signature/Incorporator