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STATE
OFFICE
TALLAHASSEE, FLORIDA

SANDTON MANAGEMENT SERVICES

ACCOUNTING AND BOOKKEEPING SERVICES

400 VIA LUGANO CIRCLE, # 202

BOYNTON BEACH, FL 33436

Fax: (561) 735-0314

February 10, 2004

State of Florida
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314-6327

Attention: New Listing Section

Dear Sir/Madam

Re: New Listing for Doctor Leather, Inc

Enclosed please find our check for the \$78.75 for the new registration and filing fees.

Should there be any further add on fee, kindly fax us at the above number as this Registration is urgently needed.

Thanking you

Yours sincerely,

A handwritten signature in cursive script that reads "Andre Marais". The signature is written in dark ink and is positioned above the printed name.

Andre Marais

Mar.

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I – NAME

The name of the Corporation is:

DOCTOR LEATHER, INC

ARTICLE II – DURATION

This Corporation shall have perpetual existence commencing on the date of the filing of these articles with the Department of State.

ARTICLE III – PURPOSE

This Corporation is organized of providing leather, vinyl repairs and dyeing.

ARTICLE IV – CAPITAL STOCK

This Corporation is authorized to issue 1,000 shares of \$1.00 par value Common Stock which shall be designated Shares.

ARTICLE V – PRE-EMPTIVE RIGHTS

Every Shareholder, upon the sales of cash of any new stock of this Corporation shall have the right to purchase the prorata share hereof (as nearly as many be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI – INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation is 400 Via Lugano Circle, # 202, Boynton Beach, FL 33436. The name of the initial registered agent of this Corporation at the above address is Andre Marais.

ARTICLE VII – INITIAL BOARD OF DIRECTORS

This Corporation shall have 1 (One) Director constituting the initial Board. The number of Directors may be either increased or decreased from time to time by the Bylaws. The names and addresses of the initial Board of the Directors of this Corporation are:

NAME:

ADDRESS:

CHRISTIAAN H. MARAIS 3967 Cocoplum Circle, Unit F, Coconut Creek, FL 33063

Certificate designating place of business or domicile to the service of process within Florida, naming agent upon whom process may be served.

In compliance with Section 48.091 Florida Statutes, the following is submitted:

First - That (Name of Corporation)

DOCTOR LEATHER, INC.

Legal address - 3967 Cocoplum Circle, Unit F, Coconut Creek, FL 33063

Desiring to organize or qualify under the laws of the State of Florida with its Principal place of business at city of

Coconut Creek, Florida

State of Florida has named Andre Marais
(Resident Agent)

Located at 400 Via Lugano Circle, # 202, Boynton Beach, FL 33436.

State of Florida as its agent to accept service of process within Florida.

SIGNATURE



CORPORATE OFFICER

TITLE: PRESIDENT

Date: February 10th, 2004

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES.

SIGNATURE:

Andre' Marais
(Resident Agent)

ARTICLE VIII – INCORPORATION

The name and address of each person signing this articles is:

NAME

ADDRESS

CHRISTIAAN H. MARAIS 3967 Cocoplum Circle, Unit F, Coconut Creek, FL 33063

ARTICLE IX – INDEMNIFICATION

This Corporation shall indemnify any Officer or Director or any former Officer or Director to the full extent permitted by law.

ARTICLE X – AMENDMENT

This Corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation or any amendment hereto, and any right conferred upon the Shareholders is subjected to this reservation.

In witness whereof, the undersigned subscribers have executed these Articles of Incorporation on this February 10th, 2004.


SUBSCRIBER/PRESIDENT

SUBSCRIBER

STATE OF FLORIDA, COUNTY OF BROWARD

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CLERK OF STATE
TALLAHASSEE, FLORIDA

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE
ACKNOWLEDGEMENTS IN THE STATE AND COUNTY SET FORTH ABOVE,
PERSONALLY APPEARED

CHRISTIAAN H. MARAIS

BE AND KNOWN BY ME THE PERSON WHO EXECUTED THE
FOREGOING ARTICLES OF INCORPORATION.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND
AFFIXED MY OFFICIAL SEAL IN THE STATE AND COUNTY AFORSAID,
THIS 10 DAY OF February, 2004

Marlene Thomas
NOTARY PUBLIC, STATE OF FLORIDA
AT LARGE

MY COMMISSION EXPIRED AT _____

