

P04000138770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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06 OCT -6 PM 3:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓ (Signature) 10-6-04

TRANSMITTAL LETTER

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

SUBJECT: Champion Locksmiths, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: David Lesser

Name (Printed or typed)

5379 Lyons Road #124

Address

Coconut Creek, Florida 33073

City, State & Zip

954-549-5402

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:

Champion Locksmiths, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5379 Lyons Road #124
Coconut Creek, Florida 33073

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail Service Business

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

David Lesser, President

David Katz Tres.

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

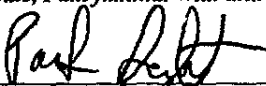
Paul Schwartz
5379 Lyons Road #124
Coconut Creek, Florida 33073

ARTICLE VII INCORPORATOR

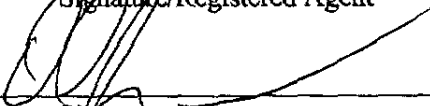
The name and address of the Incorporator is:

David Lesser
5379 Lyons Road #124
Coconut Creek, Florida 33073

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

FILED

04 OCT -6 PM 3: 47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/1/04

Date

10/1/04

Date