PU5000/67537

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PICK-UP WAIT MAIL				
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(Document Number)				
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Special Instructions to Filing Officer: OK Per Michael Brue For Correct. SA 12/28				

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ANNAMASSEE, FLORIDA

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COVER LETTER

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

SUBJECT:	Kleinerts	INCORPOR	ated	
	(PROPOSED CORPORA	E NAME – MUST INCL	DE 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: MICHAEL BRIER Name (Printed or typed) 3968 194 th TRAIL				
-	Address MIAMI, FL. 33/60 City, State & Zip			
	305-937-082 Y 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: Kleinert's, INCORPORATED ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3968 194 # TEAIL MiAMI, FL. 33/60 ARTICLE III The purpose for which the corporation is organized is: SELL DRESSY 6 AFMENT STILL DS (Clothing) 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): MICHAEL BRIER, Pres +101. REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: INCORPORATOR ARTICLE VII The name and address of the Incorporator is: MICHAEL BRIER 3968 194# TRAIL MIAMI FL 33160

Having been named as registered agent in accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

Date