

P07000021160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

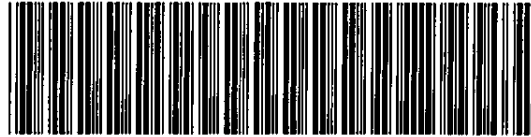
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/16/07

COVER LETTER

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

SUBJECT: Alskin, 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

FROM: Fiona McLeod
Name (Printed or typed)

1304 Milano Drive
Address

Naples, FL 34103
City, State & Zip

(239) 404-6444
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:

Alskin, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1304 Milano Drive., Naples, FL 34103

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

E-Commerce

ARTICLE IV SHARES

The number of shares of stock is:

600

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Fiona McLeod, 1304 Milano Drive, Naples, FL 34103 - President/Secretary

Jose Saco, 2004 Sheffield Ave., Marco Island, FL 34145 - Vice President

ARTICLE VI REGISTERED AGENT

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

Fiona McLeod
1304 Milano Drive
Naples, FL 34103

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Fiona McLeod
1304 Milano Drive
Naples, FL 34103

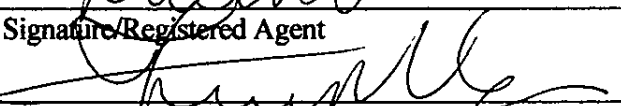
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

December 18, 2006

Date



Signature/Incorporator

December 18, 2006

Date

FILED
07 FEB 13 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA