

PO 7000028892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

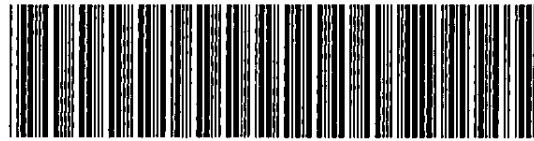
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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183-6

**COVER LETTER**

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

**SUBJECT: Biker Helmets, 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: Leslie Siegel**

Name (Printed or typed)

**6312 Buford St #308**

Address

**Orlando, Fl 32835**

City, State & Zip

**407-967-6053**

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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Biker Helmets, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

6312 Buford St #308  
Orlando Fl. 32835

mailing PO Box 590033  
Orlando Fl. 32859

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Retail sale of motorcycle helmets / mail order only

**ARTICLE IV SHARES**

The number of shares of stock is:

10,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Leslie Siegel President

**ARTICLE VI REGISTERED AGENT**

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

6312 Buford St #308 Leslie Siegel  
Orlando, Fl 32835

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

6312 Buford St #308 Leslie Siegel  
Orlando, Fl 32835

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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

*Leslie Siegel*

Signature/Registered Agent

02/22/07

Date

*Leslie Siegel*

Signature/Incorporator

02/22/07

Date