

1/9/14

Division of Corporations

Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION
Leshar Ventures Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Lesher Ventures Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

541 SW St. Lucie Crescent
Stuart, FL 34994-2873

RECORDED
STATE
TALLAHASSEE, FLORIDA

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ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

James Leshar
541 SW St. Lucie Crescent
Stuart, FL 34994-2873

Prepared By:

Bruce B. Hubbard

77 East John St.

Hicksville, New York 11801

1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

James Leshner - President/Director
541 SW St. Lucie Crescent, Stuart, FL 34994-2873

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

James Leshner
541 SW St. Lucie Crescent, Stuart, FL 34994-2873

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

9th day of January 20 14



James Leshner
Signature

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Leshner Ventures Inc.

2. The name and address of the registered agent and office is:

James Leshner
Name

541 SW St. Lucie Crescent
(P.O. Box or Mail Drop Box NOT Acceptable)

Stuart, FL 34994-2873
(City / State / Zip)

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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

James Leshner
James Leshner
SIGNATURE

01/09/2014
(Date)

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