# P97000034551

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

000002145280--C -04/16/97--01102--007 \*\*\*\*\*78.75 \*\*\*\*\*78.75

UBJECT:	PREMIUM LUGGAC	GE REPAIR , INC	lix)
	(),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		- <b>-</b>
inclosed is an original a	and one(1) copy of the artic	eles of incorporation and a	check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	YAROSLAV POLISK Name (Prin	I Y ted or typed)	
	74 WIMBLEDON LA	KE DR.	
	PLANTATION , FL. City, St.	33324 ate & Zip	

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

(954)423-9316

97 APR 16 AN II: 15
SECRETARY OF STATE
TALL AHASSEE ELOPIDA

#### 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:

PREMIUM LUGGAGE REPAIR , INC

ARTICLE II PRINCIPAL OFFICE

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

4783 W. ATLANTIC AVE.,

DELRAY BEACH , FL. 33445

ARTICLE III SHARES

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

THREE HUNDRED (300) NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

YAROSLAV POLISKIY

4783 W. ATLANTIC AVE.,

DELRAY BEACH , FL.33445

97 APR 16 AN 11: 15
SECRETARY OF STATE

#### ARTICLE V INCORPORATOR(S)

#### See instructions for officers/directors

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

YAROSLAV POLISKIY

74 WIMBLEDON LAKE DR.

PLANTATION , FL. 33324

IRINA POLISKIY

74 WIMBLEDON LAKE DR.

PLANTATION , FL. 33324

The un	dersigned i	ncorporator(s) has	(have) executed	these Articles of In	corporation this
_15_	_ day of .	APRIL	, 19	97	
(An add	itional a <del>rti</del>	cle must be added	if an effective of	ate is requested.)	
		2			
		Mo	Sign	Y POLIS	SKIY
	<del>-,</del>	moon	Sign	I Poliskiy	
		( /		/	

### Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

l.	The name of the corporation is PREMIUM LUGGAGE REPAIR , INC	<del></del>
2.	The name and address of the registered agent and office is:	97 I SECR
	YAROSLAV POLISKIY (NAME)	FILE L APR 16 / ETARY OF AHASSEE.
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	AN II: 15 OF STATE FLORIDA
	DELRAY BEACH ,FL. 33445 (CITY/STATE/ZIP)	

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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.