

P970000 67772

TRANSMITTAL LETTER

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

SUBJECT : FOUR SEASONS HAND BAGS, INC.

(Proposed corporate name - must include suffix)

500002256085--3
-08/04/97--01045--002
*****78.50 *****78.50

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☒

\$78.50

Filing Fee & Certificate

☐

\$122.50

Filing Fee & Certified Copy

FROM :

HUSEYIN C. IPEKTEL

Name

9438 US HWY 19 N.

Street Address

PORT RITCHEY FL 34668

City, State & zip

(813) 992-4209

Daytime Phone Number

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

97 AUG -4 AM 7:52

FILED

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

T.M. - 8/6/97

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 :

FOUR SEASONS HAND BAGS, INC.

ARTICLE II PRINCIPAL OFFICE

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

***9438 US HWY 19 N.
PORT RITCHEY FL 34668***

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is **(1000) one thousand shares of one dollar (\$1.00) par value common stock, which shall be designated "COMMON STOCK".**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is :

***HUSEYIN C. IPEKTEL
9438 US HWY 19 N.
PORT RITCHEY FL 34668***

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ARTICLE V INCORPORATOR(S)

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

HUSEYIN C. IPEKTEL
9438 U S HWY 19 N.
PORT RITCHEY FL 34668

President

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

29th day of July 1997

Huseyin IPEKTEL
Signature

Signature

Signature

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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.

1. The name of the corporation is : FOUR SEASONS HAND BAGS, INC

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

HUSEYIN C. IPEKTEL

(Name)

9438 US HWY 19 N.

(P.O.BOX "not" accepted)

PORT RITCHEY FL 34668

(City/State/Zip)

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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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 the 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.

Huseyin IPEKTEL
Signature

7/29/97
Date