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ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: SHADO LEATHER, INC.

AUDIT NUMBER..... H9800000714

DOC TYPE..... FLORIDA PROFIT CORPORATION OR P.A.

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# ARTICLES OF INCORPORATION OF Shado Leather, Inc.

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The undersigned incorporator(s), for the purpose of forming a corporation under the SECRETARY OF STATE TALLAHASSEE, FLORIDA Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

Shado Leather, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

Shado Leather, Inc. 4408 N.E. 11<sup>th</sup> Avenue Oakland Park, FL 33334

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000 shares

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Herman Allison 4408 N.E. 11<sup>th</sup> Avenue Oakland Park, FL 33334

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Charles Wesockes, CPA 2131 Hollywood Blvd. Suite 208 Hollywood, FL 33020 (954) 920-0110

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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):

Herman Allison 4408 N.E. 11<sup>th</sup> Avenue Oakland Park, FL 33334

The under	signed in	corporator(s) ha	s (have) execute	d these Artic	les of Incorp	oration this	
2nd	_day of _	January	, <u>1998</u>	<u>'</u>			
	thelan	dan					
	116		• · · · · · · · · · · · · · · · · · · ·				
Signature	-/				-		

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#### CERTIFICATE OF DESIGNATION

### 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 / RESIGNED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

Shado Leather, Inc.

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

Herman Allison 4408 N.E. 11<sup>th</sup> Avenue Oakland Park, FL 33334

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.

(Signature)

(Date)

JAN 13 AM 8: 30
RETARY OF STATE
ALLASSEF FLORIDA

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