Pagaway 24/12

FILED 99 MAR IL PM 2:01

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

Enclosed

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 1 6 1969

-03/11/99--01049--002 *****87.50 *****87.50

SUBJECT: LAR Leathers, Inc.
(Proposed corporate name - must include suffix)

ed is 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 ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Richard Name (Pr	Stieff inted or typed)	
	498 N. OBT #29 Address		
	Orlando, FL City, S	32805 State & Zip	
	407-841-28: Daytime Te	32. Elephone number	

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

P.Hall

ARTICLES OF INCORPORATION

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

ARTICLE I NAME OF CORPORATION

The name of the corporation shall be:

L & R Leathers, Inc.



ARTICLE II PRINCIPAL OFFICE

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

498 N. Orange Blossom Trail Suite D Orlando, FL 32805

ARTICLE III SHARES

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

One (1) at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

RICHARD STIEFF 498 N. Orange Blossom Trail Unit #29 Orlando, FL 32805

ARTICLE V ___ INCORPORATOR

The Name and address of the incorporator to these Article of Incorporation is:

RICHARD STIEFF 498 N. Orange Blossom Trail Unit #29 Orlando, FL 32805

Signature & Printed Name/Incorporator

<u>-5 -77</u>

Date

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/Registered Agent

3-5-99

Date