

10:	Registration Sec Division of Cor			
SUBJ	ECT: Hank'	s Furniture, Inc.		•
		(Name of corp	oration - must include suffix)	
Dear S	ir or Madam:			-
"Certif	closed "Applicati icate of Existence act business in F	e", and check are submitte	n for Authorization to Transa ed to register the above refere	ct Business in Florida", nced foreign corporation
Please	return all corresp	ondence concerning this r	natter to the following:	
Je	nnifer Brown	e		
		(Na	ne of Person)	
На	nk's Furnitu	re, Inc.		
		(Fire	n/Company)	
P.	0. Box 1918	08 9912 In	terstate 30	
			Address)	<u> </u>
Li	ttle Rock. A	R 72219-1808-	12209	
			tate and Zip code)	
For furt	her information o	concerning this matter, ple	ease call:	500003526395 -01/08/0101013001 ******70.00 ******70.00
Jen	nifer Browne	at (50	1) 565-3561 Ext.	336
	(Name of Person		rea Code & Daytime Telepho	one Number)
Registra Division 409 E. (Tallaha Enclose		ne following amount:	MAILING ADDRESS Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	S PH 3
\$70.0	00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FÖLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	viations of like import in language as will cl or partnership if not so contained in the nam		
•		•	
. <u>Arkansas</u>		_3	710479121
(State or count	ry under the law of which it is incorporated)	}	(FEI number, if applicable)
11/24/19	75	5.	Perpetual
(Da	te of incorporation)	•	(Duration: Year corp. will cease to exist or "perpetual"
Upon Qua	lification		
	acted business in Florida. If corporation has (SEE SECTIONS 607.1	1501,	transacted business in Florida, insert "upon qualification 607.1502 and 817.155, F.S.)
	(Principal office	_	
D 0 D	` •		•
P. O. Bo	x 191808, Little Rock, AR 72		
	(Current mailing	addre	255)
	nd/or wholesale sale of furn		
	ind/or wholesale sale of furi (s) of corporation authorized in home state of		
(Purpose	(s) of corporation authorized in home state of	or cou	antry to be carried out in state of Florida)
(Purpose	(s) of corporation authorized in home state of reet address of Florida registered age	or cou	intry to be carried out in state of Florida) P.O. Box or Viail Drop Box NOT acceptable)
(Purpose	(s) of corporation authorized in home state of	or cou	intry to be carried out in state of Florida) P.O. Box or Viail Drop Box NOT acceptable)
(Purpose Name and <u>str</u> Name:	(s) of corporation authorized in home state of reet address of Florida registered ages. Henry C. Browne	or cou	intry to be carried out in state of Florida) P.O. Box or Viail Drop Box NOT acceptable)
(Purpose Name and str	(s) of corporation authorized in home state of reet address of Florida registered age	or cou	antry to be carried out in state of Florida)
(Purpose Name and str	(s) of corporation authorized in home state of reet address of Florida registered ages Henry C. Browne 1415 Dove Lane	or cou	(P.O. Box or wail Drop Box NOT acceptable)
(Purpose Name and str	(s) of corporation authorized in home state of reet address of Florida registered ages. Henry C. Browne	or cou	(P.O. Box or viail Drop Box NOT acceptable) , Florida 32328
(Purpose Name and <u>str</u> Name: Office Address:	(s) of corporation authorized in home state of reet address of Florida registered ages. Henry C. Browne 1415 Dove Lane St. George Island (City)	or cou	mtry to be carried out in state of Florida) (P.O. Box or Viail Drop Box NOT acceptable)
(Purpose Name and str Name: ffice Address:	(s) of corporation authorized in home state of reet address of Florida registered ages. Henry C. Browne 1415 Dove Lane St. George Island (City) agent's acceptance:	nt: ((P.O. Box or viail Drop Box NOT acceptable) , Florida 32328 (Zip code)
(Purpose Name and str Name: ffice Address: Registered a	(s) of corporation authorized in home state of reet address of Florida registered ages. Henry C. Browne 1415 Dove Lane St. George Island (City) agent's acceptance: med as registered agent and to accept so	nt: (mitry to be carried out in state of Florida) (P.O. Box or viail Drop Box NOT acceptable) , Florida 32328 (Zip code)
(Purpose Name and str Name: Office Address: O. Registered a Laving been namesignated in thi	(s) of corporation authorized in home state of reet address of Florida registered ages. Henry C. Browne 1415 Dove Lane St. George Island (City) agent's acceptance: med as registered agent and to accept so application, I hereby accept the appoint	nt: (nntry to be carried out in state of Florida) (P.O. Box or Viail Drop Box NOT acceptable) , Florida 32328 (Zip code) ce of process for the above stated corporation at the cent as registered agent and agree to act in this can
(Purpose Name and str Name: Office Address: O. Registered a Laving been nancesignated in this	(s) of corporation authorized in home state of reet address of Florida registered ages. Henry C. Browne 1415 Dove Lane St. George Island (City) agent's acceptance: med as registered agent and to accept so application, I hereby accept the appoint	ervice	nntry to be carried out in state of Florida) (P.O. Box or Viail Drop Box NOT acceptable) , Florida 32328 (Zip code) re of process for the above stated corporation at the cent as registered agent and agree to act in this capitative to the proper and complete performance of

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: __ Address: Address: Director: _ Address: _ **B. OFFICERS** President: Henry C. Browne Address: ____9912 Interstate 30 Little Rock, AR 72209 Vice President: Stuart Skiles Address: ____ 9912 Interstate 30 Little Rock, AR 72209 Secretary: Marc Vail Address: 9912 Interstate 30, Little Rock, AR 72209 Treasurer: __ Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

14. Henry C. Browne, President



State of Arkansas SECRETARY OF STATE



OF A DOMESTIC CORPORATION

I, Sharon Priest, Secretary of State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show:

HANK'S FURNITURE, INC.

a corporation chartered under the laws of the State of Arkansas, filed Articles of Incorporation November 24, 1975.

I further certify that as far as the records show, this corporation is at this time chartered and in good standing, having met all the requirements governing a domestic corporation in this State.

In Testimony Whereof, I have hereunto set my hand and affixed my Official Seal. Done at my office in the City of Little Rock, Arkansas this 3rd day of January 2001.

Sharon Priest, Secretary of State

T D Smitt

C-2/Rev 10-1-88