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Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : CORPDIRECT AGENTS, INC.
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DIVISION OF CORPORATIONS

FOREIGN PROFIT/NONPROFIT CORPORATION
OFFICE FURNITURE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS 11/10

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

1. OFFICE FURNITURE, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CONNECTICUT 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/02/1968 5. PEPETUAL
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability)

7. 28 GARFIELD STREET, NEWINGTON, CT 08111
(Principal office address)

28 GARFIELD STREET, NEWINGTON, CT 08111
(Current mailing address)

8. Design, sell and installation of office furniture.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 515 East Park Avenue

Tallahassee, Florida 32301
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

NRAI Services, Inc.

By: Joelle Churik
(Registered agent's signature)

Joelle Churik, Assistant Secretary

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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Al Berdoline

Address: 28 Garfield Street

Newington, CT 06111

Director: Don Miller

Address: 28 Garfield Street

Newington, CT 06111

B. OFFICERS

President: Richard C. Mills

Address: 2686 Berlin Turnpike

Newington, CT 06111

Vice President: _____

Address: _____

Secretary: Lauren Benton

Address: 2686 Berlin Turnpike, Newington, CT 06111

Treasurer: Matthew Danyliw

Address: 28 Garfield Street, Newington, CT 06111

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
(Signature of Director or Officer listed in number 12 of the application)

14. Matthew Danyliw, Treasurer
(Typed or printed name and capacity of person signing application)

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Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that the certificate of incorporation of

OFFICE FURNITURE, INC.

a domestic STOCK corporation, was filed in this office on February 02, 1968, a certificate of
dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the
records of this office such corporation is in existence.



Secretary of the State

Date Issued: November 09, 2011

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