F12000003531

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECHERARY OF STATE ALLARASSEE, FLORIDA

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Sergenian's of Flor Name of corporation - m	· do , Inc
Name of corporation - m	ust include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Aut "Certificate of Existence," or "Certificate of Good Standing above referenced foreign corporation to transact business in	g" and check are submitted to register the
Please return all correspondence concerning this matter to t	
James D GA	ner
Name of Pers	son
Sergenian's of F	-loredo, Inc
Firm/Compan	y ,
2805 W Belt1	ine Hwy
Address	
James D GAI Name of Pers Sergenian's of F Firm/Compan 2805 W Beltle Address Madison, WI City/State and 2	537/3
City/State and 2	Zip code
Jing C Sergenians E-mail address: (to be used for f	The state of the s
E-mail address: (to be used for f	uture annual report notification)
For further information concerning this matter, please call:	Luture annual report notification) Luture annual report notification annual report
	27 A
DAVID SKOWED at (608)	663-2523 Es =
Name of Person Area Cod	e & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	78.75 Filing Fee & Sertified Copy Sertificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

Same in a Florida Tre	A .	
Sergenian's of Florida 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 busin	ess in Flori	ida)
(State or country under the law of which it is incorporated) 3. 46-0847500 (FEI number, if applicable)		
(Date of incorporation) 5. Penpetual (Duration: Year corp. will cease to exist o	r "perpetua	al")
		,
(Date first transacted business in Florida, if prior to registration)		
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
2805 W Beltline Hwy		
(Principal office address)		
Madison, wt 53713 (Current mailing address)		
Commercial Sales of Floor Coverings		
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	<u> </u>	
. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	和	AUS 2
Name: JAMES D GARNER	指	~
Office Address: 9309 E Adamo DR	401± 118 4.0	AH 10: 23
<u>Tampa</u> , Florida <u>33619</u> (City) (Zip code)		23
(City) (Zip code)		

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.

(Registered agent's signature)

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: JAMES D. GARNER			
Address: 2805 W Beltline Hwy		···-	
Madison, WI 53713			
Vice Chairman: Thomas A. Sergenian	· · · · · ·		
Address: 2805 W Beltline Hwy			_
MALISON, WI 53713			
Director:			
Address:			
Director:			_
Address:			
B. OFFICERS			
President: JAMES D GARNER			
Address: 2805 W Beltline Hwy			
MADISON, WI 53713		2 №	
Wise President: Thomas A Sergenian		<u>25</u>	-1
Address: 2805 W Beltline Hwy	Min	- -	
MADISON, WI 53713	<u> </u>	<u> </u>	
Secretary: Thomas A. Sergenian		23	
Address: 2805 W Belline Hwy, Madison, CUI 5371	3		
Treasurer: TAMES D GARNER			
Address: 2805 W Beltline Hwy, MAdison WI 5371	3		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	or director	S.	
13 Umstortun			
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the	facts state	d herein	
are true and that he or she is aware that false information submitted in a document to the Department third degree felony as provided for in s.817.155, F.S.			; a
14. Tames D Garner CEO (Typed or printed name and capacity of person signing application)			
(Typed of printed fiame and capacity of person signing approacion)			

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, PAUL M. HOLZEM, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

SERGENIAN'S OF FLORIDA, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is August 23, 2012.

I further certify that said corporation or limited liability company has not yet completed its initial report year, and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wisconstant, and that said corporation or limited liability company has not filed articles of dissolution.

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IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on August 24, 2012.

Taul In. Holge

PAUL M. HOLZEM, Administrator Division of Corporate and Consumer Services

Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

110515-8AA90679