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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Furniture Match, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Darren Green
(Name of Person)

Furniture Match, LLC
(Firm/Company)

330 Columbia Dr.
(Address)

Tampa, FL 33606
(City/State and Zip Code)

For further information concerning this matter, please call:

Darren Green at (727) 422-1100
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Furniture Match, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

330 Columbia Dr
Tampa, FL 33606

Mailing Address:

330 Columbia Dr
Tampa, FL 33606

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Darren Green

Name

330 Columbia Dr.

Florida street address (P.O. Box **NOT** acceptable)

Tampa, FL 33606

FL

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 as provided for in Chapter 608, F.S.



Registered Agent's Signature

CLERK OF STATE
TALLAHASSEE, FLORIDA

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(CONTINUED)

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member

Tampa, FL 33606

Deerfield, IL 60015

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