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COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: FURNITURE SERVICES 911, LLC |
| (Name of Limited Liability Company) |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida. |
| Please return all correspondence concerning this matter to the following: |
| RICHARD G DECKER |
| (Name of Person) |
| DECKER & COMPANY, LLC |
| (Firm/Company) 1875 OLD ALABAMA ROAD, SUITE 640 |
| 1875 OLD ALABAMA ROAD, SUITE 640 (Address) (Address) |
| ROSWELL, GA. 30076-2264 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| RICHARD G DECKER |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: \$\sumsymbol{\sum}\$\$125.00 Filing Fee \$\sumsymbol{\sum}\$\$130.00 Filing Fee & \$\sum \$\$160.00 Filing Fee, Certificate Certificate of Status \$\sum \text{Certified Copy}\$\$ Certificate of Status \$\sum \text{Certified Copy}\$\$ |



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2007

RICHARD G DECKER 1875 OLD ALABAMA ROAD, STE 640 ROSWELL, GA 30076-2264

SUBJECT: FURNITURE SERVICES 911, LLC

Ref. Number: W07000001180

We have received your document for FURNITURE SERVICES 911, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 207A00001768

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. FURNITURE SERVICES 911, LLC | |
|--|---|
| (Name of Foreign Limited L | Liability Company) |
| (Jurisdiction under the law of which foreign limited liability | 3. 04-3600863 (FEI number, if applicable) |
| 4. 02/20/2002 (Date of Organization) | 5. PERPETUAL (Duration: Year limited liability company will cease to |
| 6. 01/01/2007 | exist or "perpetual") |
| (Date first transacted business in Flo (See sections 608,501 & 608,502 F.S. | |
| 7. 2 PORTOFINO DRIVE, # 1407 | 07 |
| PENSACOLA BEACH, FL. 32561 | of Principal Office) |
| (Street Address | of Principal Office) |
| 8. If limited liability company is a manager-managed | |
| 9. The name and usual business addresses of the man | aging members or managers are as follows: |
| ERIC BERGMAN 1875 OLD A | LABAMA RD. 4640 ROSWELL, CA 300% |
| | |
| | |
| | |
| 10. Attached is an original certificate of existence, no more than 90 of the jurisdiction uncler the law of which it is organized. (A photocop translation of the certificate uncler oath of the translator must be subr | |
| 11. Nature of business or purposes to be conducted or | r promoted in Florida: |
| Furniture repair service | |
| Richard St | ecke |
| | thorized representative of a member. |
| (In accordance with section 608,408(3), F an affirmation under the penalties of perji | .S., the execution of this document constitutes ury that the facts stated herein are true.) |
| RICHARD G DECKER | |

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

| Fl | JRNIT | URE | SER\ | /ICES | 911. | LLC |
|----|--------------|-----|------|-------|------|-----|
|----|--------------|-----|------|-------|------|-----|

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

2 PORTOFINO DRIVE, #1407 - Richard G. Decker (Name)

PENSACOLA BEAACH, FL. 32561

Florida Street Address (P.O. Box NOT ACCEPTABLE)

FL City/State/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, Florida Statutes.

Richard Strecker (Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

FURNITURE SERVICES 911, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 02/20/2002 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 4th day of January, 2007

Cathy Cox Secretary of State

Certification Number: 469735-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp