Division of Corporations



Florida Department of State

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM
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Phone : (512)418-6949
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Furniture.com America LLC

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MAY 1 6 2017

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUMMITTED TO REGISTER A FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS INTITIE STATE OF FLORIDA:

1. Furniture com America (Name of For	a LLC reign Limited Liability Company; must include "Limited Liability Company," "Li.C.," or "LLC	20)
(If name unavailable, enter a	alternate name adopted for the purpose of transacting business in Florida. The alternate name mu	is Include "Llinited
2. Delaware	3. 812575105	
(Jurisdiction under the law company is organized)	v of which foreign limited fightlifty (PEI number, if applicable)	
4: Upon Qualification		产员
•	(Date first transacted business in Florida, if prior (n registration:) (See sections 605.0904 & 605.0905, F.S. to determine penulty liability)	
5. 11540 Highway 92 Ea	ist, Seffner, PL 33584	
		ASSE ASSE
	(Sirvet Address of Principal Office)	- 변유 😩 🖰
6. Saine		PH I2: 55 OF STATE E. FLORID
,	•	85 K
	(Mailing Address)	
7. Nome and street address	ss of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	C T Corporation System	
• •	1200 South Pine Island Rond	
Childy Macions.		
	Pinnintion Florida 33324 (City) (Zip code)	
designated in this applicate complywith the provisi	orance: agistered opens and to accept service of process for the above stated limited liability eculain. I hereby accept the appointment as registered agent and ogree to act in this captions of his statutes relative to the propurant complete performance of my fulles and my pumilion as registered agent. CT Corporation System Assistant Se	acitys. I further agree Lamifondline with and
	(Registured agent's signature)	
8. The name, title or capa	acity and address of the person(s) who has/have authority to manage is/are:	
	lighway 92 East, Seffher, Fl. 33584 - Manager	

9. Attached is a certificate jurisdiction under the law of the translator must be a	e of existence, no more than 50 days old, duly authenticated by the official having custod of which it is organized. (If the certificate is in a foreign language, a translation of the cubmillited)	fy of records in the extificate under outh
	Signature of an authorized person	
This document is executed submitted in a document to	d in accordance with section 605,0203 (1) (b), Florida Statutes, I am aware that any false o the Department of State constitutes a third degree felony as provided for in \$.817,155.	Information F.S.
	Jeffrey Scaman	
	Typed or printed name it signed	

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FURNITURE.COM AMERICA LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

6034379 8300 SR# 20173310865

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jaffrey W. Bioligic v, Secretary of State

Authentication: 202515862

Date: 05-10-17