

TRANSMITTAL LETTER

P00000033881

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

300003190373--2
-03/30/00-01091-007
*****87.50 *****87.50

SUBJECT: SOFA - ART INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: PATRICIA H. McNAUGHTON
Name (Printed or typed)

3625 SW 30TH AVE
Address

FORT LAUDERDALE FL 33609
City, State & Zip

(954) 581-7197
Daytime Telephone number

FILED
MAR 30 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

CPB
4-4-00
2

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

SOFA - ART INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

3625 SW 30TH AVENUE
FORT LAUDERDALE FL 33312-6709

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WHOLESALE SALES OF SOFA'S

ARTICLE IV SHARES

The number of shares of stock is:

50

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

PATRICIA H. McNAUGHTON 6263 NW 42 CT CORAL SPRINGS FL 33067
KEITH A. McNAUGHTON 6263 NW 42 CT CORAL SPRINGS FL 33067

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

KEITH A McNAUGHTON 6263 NW 42 CT. CORAL SPRINGS FL 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

PATRICIA H. McNAUGHTON 6263 NW 42 CT. CORAL SPRINGS FL 33067

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Keith A. McNaughton
Signature/Registered Agent

3/27/00
Date

P. McNaughton
Signature/Incorporator

3/27/00
Date

PATRICIA H McNAUGHTON

FILED
MAR 30 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA