

P00000049832

TRANSMITTAL LETTER

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

SUBJECT: Wholesale Furnishings and Interiors, Inc.
(Proposed corporate name, must include suffix)

200003252612

05/15/00-01123-014

*****78.75 *****78.75

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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Sandi Tickner
Name (Printed or typed)

1385 Lake Ave
Address

Clermont, FL 34711
City, State & Zip

352-243-0196
Daytime Telephone number

FILED
00 MAY 15 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

No cert
4/1

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

T. Burch MAY 19 2000

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Wholesale Furnishings and Interiors, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1385 Lake Ave
Clermont, FL 34711

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Sandi Tickner
1385 Lake Ave
Clermont, FL 34711

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Sandi Tickner
1385 Lake Ave
Clermont, FL 34711

Sandi Tickner

Signature/Incorporator

Date

5-11-00

(An additional article must be added if an effective date is requested.)

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

Sandi Tickner

Signature/Registered Agent

Date

5-11-00