

P010000076104

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 205-0381

From: Account Name : MEDGUARD BUSINESS CENTER, INC.  
Account Number : 119990000019  
Phone : (305) 389-2049  
Fax Number : (305) 826-2165

**FLORIDA PROFIT CORPORATION OR P.A.**

**Franmar Custom Furniture, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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:  
Frammar Custom Furniture, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:  
690 West 27th Street  
Hialeah, Florida 33010

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  
The number shares which this corporation shall have the authority to issue is 100 shares of common stock NO PAR VALUE. Each share shall have equal rights to each other share with respect to dividends voting and in liquidation.

**ARTICLE IV INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and Florida street address of the initial registered agent are:  
Jorge Florencio Madrigal  
635 East 29th Street  
Hialeah, Florida 33013

**ARTICLE V INCORPORATOR**

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

Jorge Florencio Madrigal  
635 East 29th Street  
Hialeah, Florida 33013

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x   
\_\_\_\_\_  
Signature/Incorporator

August 02, 2001  
Date

( 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.

x   
\_\_\_\_\_  
Signature/Registered Agent

August 02, 2001  
Date

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