

P04880065189

(Requestor's Name)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 APR 14 P 4: 34

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4-20-04
WPC

TRANSMITTAL LETTER

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

SUBJECT: Payless Furniture Packages, Inc.
PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX

Enclosed are 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: L. Morris
Name (Printed or typed)

PO Box 135954
Address

Clermont, FL 34713
City, State & Zip

866-968-7283
Daytime Telephone number

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

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:

Payless Furniture Packages, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 135954 ; Clermont, FL 34713

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

transacting any or all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

authorized to issue 7,500 shares of
Common stock @ par value \$1.00/share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

L. Doyle, PO Box 135954 ; Clermont, FL 34713

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

L. Morris
8297 Champions Gate Blvd. #303
Champions Gate FL 33896

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

L. Morris
8297 Champions Gate Blvd #303
Champions Gate FL 33896

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

L. Morris
Signature/Registered Agent

Date

L. Morris
Signature/Incorporator

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

4/12/04

4/12/04