# POY1000 109770

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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## TRANSMITTAL LETTER

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

SUBJECT: Orion	Furnishing	s & Interiors	, Inc.
	(PROPOSED CORPOR	ATE NAME - MUST INC	LUDE SUFFIX)

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

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

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:

Orion Furnishings & Interiors, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
2131 NW 139th St. Bay #16
Opa LOCKA, F1 33054

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Furniture retailing

#### ARTICLE IV SHARES

The number of shares of stock is:

1000

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Tani Stanley

2760 NW 175th St.

Opa LOCKA, F1 33056

President / Cwner

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Tani Stanley 2760 NW 175th St Opa LUCKA, F1 33056

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tani Stanley 2760 NW 175th St. Opa Locka, Fl 33056

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