## P0500017047

(Address)				
(Address)				
(Document Number)				
<u> </u>				
Special Instructions to Filing Officer:				

Office Use Only



500043410665

1117 PART -- 13 (168-- 118 +\* 27, SA

05 JAN 24 PH 2: 14

B2/2

## TRANSMITTAL LETTER

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

SUBJECT:	Skeffington's	retail Inc.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee	\$87.50 Filing Fee,
	& Certificate of Status	& Certified Copy  ADDITIONAL CO	Certified Copy & Certificate of Status PY REQUIRED
FROM:	John Skeff Name	ington_	
	Name	(Printed or typed)	
	2203 Sto	tesbury Wo	24
	welling	ton, FC 3341 ( State & Zip	1
	561	-841-3004	
	Daytime T	elephone 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)	SECRETAGE FILE!
ARTICLE I NAME  The name of the corporation shall be: Skettington's Retail	05 JAN 24 PM 2: 14
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: PO BVX 541569 Greenachts, FC 33	34 <b>5</b> 4
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: To conduct a retail furniture operation operation operation of the purpose of th	business as on in the
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  John Skeffington CEO  Joei Skeffington President	
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered at the control of the r	agent is:
Joci Skeffington 2203 Statesbury Way Wellington. FC 33414 ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:  Joci Skeffington 2203 Stotesbury way wellington if 33414	*****
Having been named as registered agent to accept service of process for the above stated corporatio certificate, I am familiar with and accept the appointment as registered agent and agree to act in this	
Signature/Registered Agent Oci Sicert Motor  Signature/Incorporator	Date Date
Joei skeffington MU	