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(Re	questor's Name)	
(Ad	dress)	
(Ād	dress)	
(Cit	y/State/Zip/Phone #)
		MAIL
(Business Entity Name)		
(Do	cument Number)	
		f Status
Certified Copies		I Status
Special Instructions to	Filing Officer:	
	Office Use Only	1.
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FILED 05 OCT 17 AM IO: β5 INCLUMENTED STATE Charles Boudrea

COVER LETTER

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

SUBJECT: WHOLESALE OFFICE FURNITURE, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

S70.00 Filing Fee ✓ \$78.75 Filing Fee & Certificate of Status

 \$78.75
 \$87.50

 Filing Fee
 Filing Fee,

 & Certified Copy
 Certified Copy

 & Certificate of Status
 Status

 ADDITIONAL COPY REQUIRED
 Certified Copy

FROM: WHOLESALE OFFICE FURNITURE, INC.

Name (Printed or typed)

5203 S. Lois Ave.

Address

Tampa, FL 33611

City, State & Zip

813-831-1881

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:

Wholesale Office Furniture, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5203 S. Lois Ave., Tampa, FL 33611

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to engage in any activity or business permitted under the laws of the United States and of the State of Florida.

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):

Karen Christian, 1949 60th Street, North, St. Petersburg, FL 33710, President Michael A. Teets, 1713 Athens Court, Lakeland, FL 33803, Vice President William W. Christian, 1949 60th Street, North, St. Petersburg, FL 33710, Treasurer Nancy A. Teets, 405 West Poinsettia Street, Lakeland, FL 33803, Secretary

ARTICLE VI REGISTERED AGENT

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

William W. Christian 1949 60th Street, North, St. Petersburg, FL 33710

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Karen Anne Christian, 1949 60th Street, North, St. Petersburg, FL 33710

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

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Signature/Registered Agent Bristian Signature/Incorporator

15 0CT 2005 Date 15 OCT 2005 Date

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813-831-3873