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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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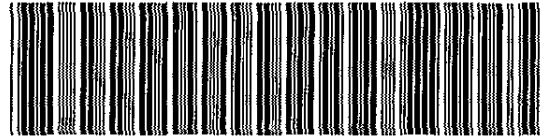
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2006 FEB 20 2006

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## COVER LETTER

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

**SUBJECT:** GASTON'S USED 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:

☐ \$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:** GASTON'S USED FURNITURE, INC

Name (Printed or typed)

1032 NORTH PINE HILL ROAD

Address

ORLANDO, FLORIDA 32808

City, State & Zip

(407) 484-6483

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:

GASTON'S USED FURNITURE, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1032 NORTH PINE HILL ROAD  
ORLANDO, FLORIDA 32808

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO SALE AND OR TRADE USED FURNITURE.

## ARTICLE IV SHARES

The number of shares of stock is:

1

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

GASTON DEROSIER  
1032 NORTH PINE HILL ROAD  
ORLANDO, FLORIDA 32808

## ARTICLE VI REGISTERED AGENT

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

GASTON DEROSIER  
1032 NORTH PINE HILL ROAD  
ORLANDO, FLORIDA 32808

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GASTON DEROSIER  
1032 NORTH PINE HILL ROAD  
ORLANDO, FLORIDA 34759

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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



Signature/Registered Agent

2/13/06  
Date



Signature/Incorporator

2/13/06  
Date

FILED  
06 FEB 16 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA