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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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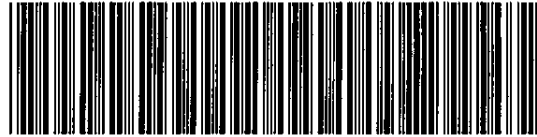
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT: FAY 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: SANDRA GORDON**

Name (Printed or typed)

**4112 BUCKEYE COURT**

Address

**BROOKSVILLE FLORIDA 34604**

City, State & Zip

**352-796-9899**

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:

FAY FURNITURE INC.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

4112 BUCKEYE COURT  
BROOKSVILLE, FL 34604

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

RETAIL FURNITURE SALES

## **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):

SANDRA GORDON, PRESIDENT  
4112 BUCKEYE COURT  
BROOKSVILLE, FL 34606

## **ARTICLE VI REGISTERED AGENT**

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

SANDRA GORDON  
4112 BUCKEYE COURT  
BROOKSVILLE, FL 34604

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

SANDRA GORDON  
4112 BUCKEYE COURT  
BROOKSVILLE, FL 34604

\*\*\*\*\*

*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

12/30/2006

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12/30/2006

\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA