

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

#8863924

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
FURNITURE CONSULTANTS FLORIDA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 AUG 14 AM 9:25

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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:

FURNITURE CONSULTANTS FLORIDA, INC.**ARTICLE II PRINCIPAL OFFICE**

Principal street address

 9200 S. Dadeland Blvd. Ste. 508
 Miami, FL 33156

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the corporation laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: Michael Eble, President
 Address: 841 Avenue of the Americas
2nd Fl
New York, NY 10011

Name and Title: _____

Address: _____

Name and Title: Michael Eble, Director
 Address: 841 Avenue of the Americas
2nd Fl
New York, NY 10011

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

 Name: United Corporate Services, Inc.
 Address: 9200 South Dadeland Boulevard, Suite 508
Miami, FL 33156
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

 Name: Maria R. Fiachetti
 Address: 10 Bank St Ste 560
White Plains, NY 10606

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

 Required Signature/Registered Agent
Michael A. Barr, President

Aug. 14, 2013

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 Required Signature/Incorporator
Maria R. Fiachetti

Aug. 14, 2013

Date

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