PHOCOPHY

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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	of Status		
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Special Instructions to	Filing Officer:			
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Office Use Only



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14 SEP -2 AN 8: 48

COVER LETTER

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

SUBJECT: Classic Consignmen	ts, Inc.	
	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	d a check for:
\$\bigsize \\$70.00 \bigsize \\$78.75 \\ Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Donna J. Stone	(Printed or typed)	
6653 Southport Dr		
Boynton Beach, Fl	Address _ 33472	
561-445-7571	State & Zip	
Daytime To	elephone number	·

NOTE: Please provide the original and one copy of the articles.

dstone@atimetomove.com

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ICLE IV SHARES unber of shares of stock is: 1000 ICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Donna J. Stone P/D Address 6653 Southport Drive Boynton Beach, Fl 33472 Name and Title: Barbara Horvitz S/D Name and Title: Delray Beach, FL 33445 Name and Title: Name and Title: Name and Title: Address: Address: Address: Address: Address: Address: Address: Address: Name and Title: Delray Beach, FL 33445	Principal office Principal street address Principal street address Principal street address		•	Mailing address, if different is: 6653 Southport Drive	
Name and Title: Name and Title: Name and Ti	ite 9		Boynton Beach, FL 33472		
ICLE IV SHARES 1000 ICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Boynton Beach, Fl 33472 Name and Title: Address Delray Beach, FL 33445 Name and Title:	ynton Be	each, FL 33436			
Name and Title: Name and Title: Donna J. Stone P/D Name and Title: Address: A			sale of used furnitu	re and furnishings	
Name and Title: Name and Title: Donna J. Stone P/D Name and Title: Address: A					
Name and Title: Name and Title: Donna J. Stone P/D Name and Title: Name and					
Name and Title: Donna J. Stone P/D Address 6653 Southport Drive Boynton Beach, Fl 33472 Name and Title: Barbara Horvitz S/D Address 2821 S. Clearbrook Circle Delray Beach, FL 33445 Name and Title: Name and Title:					
Address Boynton Beach, Fl 33472 Name and Title: Barbara Horvitz S/D Address: Address: Address: Delray Beach, FL 33445 Name and Title: Name and Title: Name and Title:	ICLE IV SH umber of shares o	IARES 1000			
Name and Title: Barbara Horvitz S/D Name and Title: Address: Delray Beach, FL 33445 Name and Title: Name	CLE V IN	ITIAL OFFICERS AND/OR DIRECTORS		产贸 🕢	
Name and Title: Barbara Horvitz S/D Name and Title:	CLE V IN	itial officers and/or directors de:Donna J. Stone P/D	Name and Title:	75 m 22 m	
Address Delray Beach, FL 33445 Name and Title: Name and Title:	CLE V IN	TIAL OFFICERS AND/OR DIRECTORS Donna J. Stone P/D 6653 Southport Drive	Name and Title:	\$17 -2 AM	
Address Delray Beach, FL 33445 Name and Title: Name and Title:	CLE V IN	TIAL OFFICERS AND/OR DIRECTORS Donna J. Stone P/D 6653 Southport Drive	Name and Title:	SER -2 AM 8:1	
Delray Beach, FL 33445 Name and Title: Name and Title:	Name and Tit Address	Donna J. Stone P/D 6653 Southport Drive Boynton Beach, Fl 33472	Name and Title:Address:	SEF -2 AM 8: 1-2 2011 AS 1-2 F 1-2 S	
Name and Title:Name and Title:	Name and Tit Address Name and Titl	Donna J. Stone P/D 6653 Southport Drive Boynton Beach, Fl 33472 Barbara Horvitz S/D	Name and Title: Address: Name and Title:	SEH - 2 AM 8: 1-8	
	Name and Tit Address Name and Titl	Donna J. Stone P/D 6653 Southport Drive Boynton Beach, Fl 33472 Barbara Horvitz S/D 2821 S. Clearbrook Circle	Name and Title: Address: Name and Title: Address:	SEH -2 AM 8: 1-8	
Address:Address:	Name and Tit Address Name and Titl Address	Donna J. Stone P/D 6653 Southport Drive Boynton Beach, Fl 33472 Barbara Horvitz S/D 2821 S. Clearbrook Circle Delray Beach, FL 33445	Name and Title: Address: Name and Title: Address:	SEH - 2 AM 8: 1-8	

Name and T	Fitle:	Name and Title:
Address		Address:
		40 2000/1010
ARTICLE VI	REGISTERED AGENT	
	ida street address (P.O. Box NOT acceptable) of	the registered agent is:
	Mark Shaffer	-
Address:	11084 Via Amalfi	
	Boynton Beach, FL 33437	
ARTICLE VII	INCORPORATOR	
The name and add	ress of the Incorporator is:	
Name:	Donna J. Stone	
Address:	6653 Southport Drive	
	Boynton Beach, FL 33472	
Having been name this certificate, Lan	d as registereth agent to accept service of process familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
Mul	. hlun	8/18/2014
	Required Signature/Registered Agent	(Date
	ment and affirm that the facts stated herein are epartment of State constitutes a third degree felon Required Signature/Incorporator	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S. S Date
	V	

14 SEP -2 AH 8: 42