## P 16 000 52516

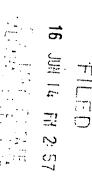
(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Durings Fatts Mann)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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## **COVER LETTER**

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

UBJECT: _	TAKE IT AWAY	FURNITURE CORP.		
ODGECT	(P	ROPOSED CORPORA	ATE NAME – <u>MUST INCL</u> I	UDE SUFFIX)
nclosed are	nn original and c	one (1) copy of the are	ticles of incorporation and	l a check for:
☐ \$7 Filing	•		\$78.75 Filing Fee & Certified Copy	& Certificate of Status
			ADDITIONAL COPY REQUIRED	
FRO		Name	e (Printed or typed)	
			3	
			Address	
	NAPLES, FLO			
	NAPLES, FLO	PRIDA 34104		<u> </u>
	NAPLES, FLO 239-692-9069	PRIDA 34104	Address	16 3.5
		City,	Address	6
		City,	Address State & Zip	16 July PH

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)

FILED

ARTICLE I NAME	TAKE IT AWAY FURNITU	RE CORP
The name of the corpora	TAKE IT AWAY FURNITU	16 JUN 16 PH 2: 5
ARTICLE II PRINC	Principal street address	Mailing address, if different is: FORE)
NAPLES, FLORIDA 3		
ARTICLE III PURPO The purpose for which t	DSE he corporation is organized is:	FURNITURE AWAY.
ARTICLE V INITIA	stock is:	
	:: MARA MERCADO :: 1195 WILDWOOD LAKES BLVD. 203	Name and Title:
Address	NAPLES, FLORIDA 34104	Address:
	THE BEST PERIOR STOP	-
Name and Title:		Name and Title:
Address		
Nutross		Address:
Name and Title:		Name and Title:
Address		Address:

Name and Title:		Name and Title:	
Address	s	Address:	
			<del></del>
	REGISTERED AGENT Street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	MARA MERCADO	or the regional agent is:	
Address:	1195 WILDWOOD LAKES BLVD. 203	_	
	NAPLES, FL 34104	_	,
		_	721 × <b>3</b>
ARTICLE VII	<u>INCORPORATOR</u>		
The name and ac	ddress of the Incorporator is:		
Name:	MARA MERCADO	_	1122
Address:	1195 WILDWOOD LAKES BLVD. 203	_	>
	NAPLES, FL 34104	_	· · · · · · · · · · · · · · · · · · ·
Effective date, if	EFFECTIVE DATE: other than the date of filing: late is listed, the date must be specific and cannot ling.)	. (OPTIONAL of be more than five busine	.) ess days prior or 90 business
Note: If the date the document's e	inserted in this block does not meet the applicable ffective date on the Department of State's records.	statutory filing requirement	s, this date will not be listed as
	ned as registered agent to accept service of proces am familiar with and accept the appointment as re		
DAI	20410- Required Signature/Registered Agent		04/11/2014
YARA MER	20490- Required Signature/Registered Agent	····	Date
I submit this doc document to the	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the f y as provided for in s.817.1:	false information submitted in a 55, F.S.
DAV	ueresko		na lula ale
Requi	red Signature/Incorporator		04/11/2016 Date