

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
SUTHERLAND CUSTOM FURNITURE, CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

EFFECTIVE DATE

9.28.2016

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SEP 30 2016

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

ARTICLE I NAMEThe name of the corporation shall be: SUTHERLAND CUSTOM FURNITURE, CORP**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1756 TINSMITH CIR LUTZTAMPA, FL 33559

Mailing address, if different is:

6089 JOHNS ROAD SUITE 11TAMPA, FL 33634**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: CARPINTERIA GENBRAL**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: MARIANELA SUTHERLAND

Name and Title: _____

Address

PRESIDENT

Address: _____

1756 TINSMITH CIR LUTZTAMPA, FL 33559

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: MARIANELA SUTHERLAND
Address: 1756 TINSMITH CIR LUTZ
TAMPA, FL 33559

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIANELA SUTHERLAND
Address: 1756 TINSMITH CIR LUTZ
TAMPA, FL 33559

ARTICLE VIII EFFECTIVE DATE: 09/28/2016

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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
09/28/2016
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
Date

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