P97MMMM2082

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

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SUBJECT:	OPMOLU	HOME FURNIS	SHINGS IN	V.
SOMECT.	(Proposed corporate name - must include suffix)			
Enclosed is an origina	l and one(1) copy of the articles	s of incorporation and a ch	neck for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	☐\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL COI	Y REQUIRED	
FROM:	Name (Pr	HAUFACRE rinted or typed)		,
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2) AROPUL TI, 37117/				
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		TOTAL TOTAL	10/27/197 M	مورده الإنشادة الإنجاب (((((((((((((((((((

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

ne 10/27/97

FILED

ARTICLES OF INCORPORATION

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The undersigned incorporator, for the purpose of forming a corporation under the Florida SECRETAIN STATE Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ORMOLU HOME FURNISHINGS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2322 EDGEWATER DRIVE OPLANDO FL 32804

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

T. STEWEN HALFACHE 1728 ERFOL WOODS DR.

APOPKA FL 32712

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

1728 Errol Woods Dr Apopka Fl. 32712

Signature/incorporator

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(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date