CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: MNOR 9.50	UCC 1 or 3 File
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Walk-In Will Pick Up	Courier
	89-57-58

ARTICLES OF INCORPORATION

οf

Furniture Medic by Fleck, Truc.

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The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Furniture Medic by Fleck, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue <u>Five Hundred</u> shares (500) of <u>One</u>

Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing adress of the corporation is:

NAME Thomas E Fleckenstein

ADDRESS 7600 Wiles Road Surfe A.

CITY Coral Springs FLORIDA [/ ZIP 33067]

The name and street address of the Initial Registered Agent of this Corporation is:

NAME Thomas E. Fleckenstein

ADDRESS 7600 Wiles Road Sunte A.

CITY Coral Springs FLORIDA ZIP 33067

ARTICLE VI - INITIAL BOARD OF DIRECTORS

NAME I homas E. Flockenstein

ADDRESS 7100 Wiks Road Suite A.

CITY Coral Springs State Fl ZIP33067

NAME

ADDRESS

CITY STATE ZIP

NAME

ADDRESS

CITY STATE ZIP

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ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

		w
NAME Thomas E Fleckenstein		
ADDRESS 7600 wiles Road Suite	A	
CITY Coral Springs	STATE F	ZIP 33067
NAME		
ADDRESS	-	
CITY	· CT ATT	am.
	STATE	ZIP
NAME		
ADDRESS	-	
CITY	STATE	ZIP
IN WITNESS WHEREOF, the undersigned subscrib	per(s) have executed these Articles of	f Incorporation this 29
day of <u>June</u> , 19 <u>98</u> .	1	
	// ////	~
	My wort the has	(Seal)
	/'	(Seal)
<i></i>		(Scar)
		(Seal)
STATE OF FLORIDA)		
_		
COUNTY OF Broward		
before me, a Notary Public authorized to take acknown appeared	owledgements in the State and Coun	ty set forth above, personally
Thomas E Fleckons	· ·	
1.1011145 1.104.70115		
known to me and known to be the person(s) wh	ho executed the foregoing Articles	of Incorporation, and who
acknowledged before me that He execut		,,
	· · · · · · · · · · · · · · · · · · ·	
IN WITNESS WHEREOF, I have hereunto affixed m	y hand and seal, in the State and Cou	enty aforesaid, this 29
day of June , 1998 .		
	914	'
(Notary Seal) (N	Overy Public State of Florida at Large)	love -
, M	Commission expires:	N M. MATONE
1. D. DRIV. LIC. My		
•	OTARY PUR OFF	ICIAL NOTARY SEAL EVELYN M MALONE
	t all ≥ co	MMISSION NUMBER
		CC505644 COMMISSION EXP.
		UCT. 25,1999

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Furn, ture Medic by Fleck, Inc.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 7600 w.les Road Suite A

Coral Springs Fl. 33067

has named Thomas E. Fleckenstein
located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

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