

F00000002732

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Kitchen Cabinet Specialists, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam: 00789-00310 ¹⁰⁰⁴⁴⁴⁻⁰⁰⁰⁵⁹ -00671

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MJH

Lisa Belinsky
(Name of Person)

Kitchen Cabinet Specialists, Inc.
(Firm/Company)

1615 Santa Ana Court
(Address)

Munster, Indiana 46321
(City/State/Zip)

W-12017

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-05/03/00-01082-005
*****87.50 *****87.50

Should you need to call someone concerning this matter, please

Lisa Belinsky at (219) 922-6652
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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DIVISION OF STATE CORPORATIONS

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

May 8, 2000

LISA BELINSKY
KITCHEN CABINET SPECIALISTS, INC.
1615 SANTA ANA COURT
MUNSTER, IN 46321

SUBJECT: KITCHEN CABINET SPECIALISTS, INC.
Ref. Number: W00000012017

We have received your document for KITCHEN CABINET SPECIALISTS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

A brief description of the entity's nature of business must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 500A00025507

RESOLUTION OF BOARD OF DIRECTORS
(Please print or type)

I, the undersigned Wayne Micka, do hereby certify
(Name)

that this Resolution of the Board of Directors of Kitchen
Cabinet Specialists, Inc.
(Corporate Name)

a corporation duly organized and existing under the laws of the State of Indiana
was duly adopted on May 10, 2000.

Be it resolved, that Kitchen Cabinet Specialists, Inc.
(Corporate Name)

organized and existing in the State of Indiana, hereby adopts the name
KCS Construction, Inc. for use in Florida.

Dated: May 10, 2000

Wayne Micka (PRESIDENT)
Signature of either Chairman, Vice Chairman or any officer

WAYNE MICKA
Type or print Name

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANACT BUSINESS IN THE STATE OF FLORIDA.

1. Kitchen Cabinet Specialists, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Indiana 3. 35-1872291
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 8, 1993 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 1615 Santa Ana Court
Munster, Indiana 46321
(Current mailing address)

8. General Contracting
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Lee Brown

Office Address: 9242 Ridge Pine Trail
Orlando, Florida, 32819
(Zip code)

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STATE OF FLORIDA
DIVISION OF CORPORATIONS

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Lee Brown
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Wayne Micka

Address: 1615 Santa Ana Court
Munster, Indiana 46321

Vice President: Stephen Henley

Address: 19816 Monterey Avenue
Lynwood, Illinois 60411

Secretary: Barbara Micka

Address: 1615 Santa Ana Court
Munster, Indiana 46321

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Wayne Micka
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Wayne Micka, President
(Typed or printed name and capacity of person signing application)

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greeting:

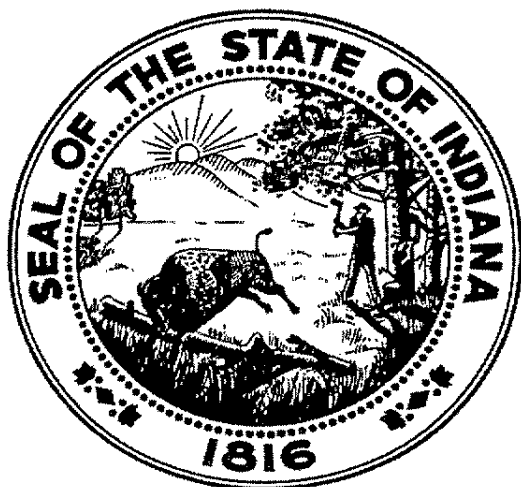
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

KITCHEN CABINET SPECIALISTS, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on January 08, 1993, and was in existence or authorized to transact business in the State of Indiana on April 20, 2000.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twentieth Day of April, 2000.

Sue Anne Gilroy

SUE ANNE GILROY, Secretary of State

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