# F1200001200

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SECRETARY OF STATE DIVISION OF CORPORATIONS

1-1961



# FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

12 MAR 19 PH 4: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 6, 2012

PHILIP E LAVELY CABINET WISHES, INC. 10 DAME KATHRYN DR SAVANNAH, GA 31411

SUBJECT: CABINET WISHES INC.

Ref. Number: W12000012961

We have received your document for CABINET WISHES 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 entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 912A00008618

## **COVER LETTER**

	Filing Section sion of Corporations	
SUBJECT:	Cabinet Wishes, Inc.	
	Name of corporation - must in	nclude suffix
Dear Sir or M	∕ladam:	
"Certificate of	d "Application by Foreign Corporation for Authoriz of Existence," or "Certificate of Good Standing" and need foreign corporation to transact business in Flor	d check are submitted to register the
Please return	all correspondence concerning this matter to the fo	llowing:
Philip E.	Lavely	
	Name of Person	
Cabinet	Wishes, Inc.	•
	Firm/Company	
10 Dam	e Kathryn Dr.	
	Address	
Savanna	ih, GA 31411	
	City/State and Zip co	ode
designer@	@cabinetwishes.com	
	E-mail address: (to be used for future	annual report notification)
For further in	nformation concerning this matter, please call:	
Philip E. I	Lavely at ( 912 ) 856	-2162
		Daytime Telephone Number
New Divis Clifto 2661	Filing Section sion of Corporations on Building Executive Center Circle shassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a	check for the following amount:	
<b>□\$</b> 70.00 F	- 11 - 11	Filing Fee & S87.50 Filing Fee, ed Copy Certificate of Status &

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

(If name unavail	able in Florida, enter alternate corporate n	ame adopted for the purpose of transacting business in Florida)
Georgia	•	3. 27-2817601
	under the law of which it is incorporated)	(FEI number, if applicable)
6-10-2010		s. Perpetual
	of incorporation)	5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
January, 20	12	
	· ·	ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)
1 Diamond	Causeway, Suite 5, Savani	nah, GA 31406
	(Principal office	,
10 Dame I	Kathryn Dr., Savannah, G	A 31411
	(Current mailing	g address)
In home sal	es to update existing cabinets	A 31411 gaddress) with Glideout shelving and other accessories.
(Purpose(	s) of corporation authorized in home state	or country to be carried out in state of Florida)
). Name and stree	et address of Florida registered agent:	(P.O. Box NOT acceptable)
Name:	InCorp Services, Inc.	or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)
Office Address:	17888 67th Court North	
	Loxahatchee	, Florida 33470 (Zip code)
	(City)	(Zin code)

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

A. DIRECTORS		
Chairman: Nancy Jo Lavely	· · · · · · · · · · · · · · · · · · ·	
Address: 10 Dame Kathryn Dr.		
Savannah, GA 31411		
Vice Chairman: Philip E. Lavely		
Address: 10 Dame Kathryn Dr.		
Savannah, GA 31411		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS	1 <del>8</del> .	
President: Nancy Jo Lavely	<del></del>	
Address: 10 Dame Kathryn Dr.		
Savannah, GA 31411		
Vice President: Philip E. Lavely	72	135. 135. 135.
Address: 10 Dame Kathryn Dr.	AR	옷
Savannah, GA 31411	مَ	57
Secretary: Philip E. Lavely	PH	193 193 193 193 193 193 193 193 193 193
Address: 10 Dame Kathryn Dr., Savannah, GA 31411		ATION.
Treasurer: Philip E. Lavely	4-	HS
Address: 10 Dame Kathryn Dr., Savannah, GA 31411		
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	.nd/or directors.	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that are true and that he or she is aware that false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.		

(Typed or printed name and capacity of person signing application)

14. Philip E. Lavely - Secretary/Treasurer

Control No. 10042004

# STATE OF GEORGIA

## Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334-1530

## CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

### CABINET WISHES INC.

#### **Domestic Profit Corporation**

was formed or was authorized to transact business on 06/10/2010 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 15th day of March, 2012

B: P.h-

Brian P. Kemp Secretary of State

Certification Number: 8451678-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp SECRETARY OF STATE DIVISION OF CORPORATIONS