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To: Division of Corporations
Fax Number : (850)205-0381

From: Account Name : LAW OFFICE OF MITCHELL A. SHERMAN, P.A.
Account Number : I20030000145
Phone : (561)738-1202
Fax Number : (561)738-1676

FLORIDA PROFIT CORPORATION OR P.A.

Factory Window Design, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Factory Window Design, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7153 Southern Blvd.
West Palm Beach, FL 33413

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Window treatment designs

ARTICLE IV SHARES

The number of shares of stock is:

100 Common, \$.01 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Rosa Lacoste
8983 Okeechobee Blvd., Suite 120
West Palm Beach, FL 33411

ARTICLE VI REGISTERED AGENT

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

Rosa Lacoste
8983 Okeechobee Blvd., Suite 120
West Palm Beach, FL 33411

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rosa Lacoste
8983 Okeechobee Blvd., Suite 120
West Palm Beach, FL 33411

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

Rosa Lacoste
Signature/Registered Agent

June 2, 2005
Date

Rosa Lacoste
Signature/Incorporator

June 2, 2005
Date

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