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PICK-UP WAIT MAIL					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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SECRETARY OF STATE
PALLAHASSEE, FINANCE

IWS ES AAM

Barfield, Murphy, Shank & Smith, PC 1121 Riverchase Office Road Birmingham, Alabama 35244 (205) 982-5500

INSTRUCTIONS FOR FILING APPLICATION BY A FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Enclosed is your foreign qualification application for the state of Florida and a copy to retain for your records.

Signature . . .

The original report should be signed (using full name and title) and dated where indicated by an appropriate corporate officer.

Filing . . .

The signed return should be filed AS SOON AS POSSIBLE with:

NEW FILING SECTION DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

Payment of tax . . .

The return indicates a filing fee in the amount of \$70.00. A check payable to the "Secretary of State" should be enclosed with the return. The company's identification number should be included on the check.

Additional Instructions...

Please attach a certificate of existence from the state of Delaware.

The return needs to be signed by CT Corporation System prior to filing. Please mail this form to them in the enclosed envelope and they will forward it to the appropriate state office.

COVER LETTER

	New Filing Division o									
SUBJE	CT: WEI	LLBORN	FOREST	r produc	CTS, IN	С.				
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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.

1.	WELLBORN FOREST PRODUCTS, INC.			_
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")			
	,,,,,			
				_
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting bu	siness in l	Florida	1)
2.	DELAWARE 3. 20-5872901			
	(State or country under the law of which it is incorporated) (FEI number, if applicab	le)		
4.	11/13/2006 5. PERPETUAL			_
	(Date of incorporation) (Duration: Year corp. will cease to exist	t or "perp	etual")
6.	JANUARY 1, 2007			
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)			
7.	2212 AIRPORT BLVD. ALEXANDER CITY, AL 35010 (Principal office address)			
	2212 AIRPORT BLVD. ALEXANDER CITY, AL 35010 (Current mailing address)			
	(Current maxing address)			
8.	SALES OF CABINETS & RELATED PRODUCTS	SEC	07	
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	RE'	1AR	
9.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	ïARY ASSEI	MAR 21	
	Name: CT CORPORATION SYSTEM	2.0 2.0	$\frac{1}{2}$	
o	ffice Address: 1200 SOUTH PINE ISLAND RD.	STATE	PH 1:06	
	PLANTATION , Florida 33324	=		
	(City) (Zip code)			

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.

DALE W. MORRIS

ASSISTANT VICE PRESIDENT

(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 business addresses of officers and/or directors:

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
•	
Address:	
B. OFFICERS	
President: TIMOTHY WELLBORN	
Address: 2212 AIRPORT BLVD.	TA: 07
ALEXANDER CITY, AL 35010	LAHV.
Vice President:	(A) N -1
Address:	19 19 E
	I: C STA LOR
Secretary: STEVEN HAYS	06 DA
Address: 2212 AIRPORT BLVD. ALEXANDER CITY,	ΔΙ. 35010
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addengum to the applicati	ion listing additional officers and/or directors.
\mathcal{A}_{i})/	
(Signature of Director or Officer listed	in number 12 of the application)
, ,	Se cretary of person signing application)
(Typed or printed name and capacity	of person signing application)

Delaware

PAGE :

The First State

I; HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WELLBORN FOREST PRODUCTS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JANUARY, A.D. 2007.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5382125

4250149 8300 070053837

DATE: 01-25-07