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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

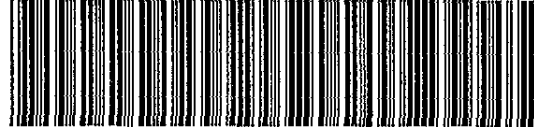
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN MAR - 1 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ~~STARS~~ QUALITY CUSTOM CABINETRY AND FINE FURNISHINGS LC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN RUTLAND

(Name of Person)

QUALITY CUSTOM CABINETRY AND FINE FURNISHINGS

(Firm/Company)

8458 MONARCH CIRCLE

(Address)

SEMINOLE, FLORIDA 33772

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN RUTLAND

(Name of Person)

at (727) 398 - 7196

(Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

QUALITY CUSTOM CABINETRY AND FINE FURNISHINGS LC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

8458 MONARCH CIRCLE
SEMINOLE, FL
33772

Mailing Address:

8458 MONARCH CIRCLE
SEMINOLE, FL
33772

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

JOHN RUTLAND
Name

8458 MONARCH CIRCLE
Florida street address (P.O. Box NOT acceptable)

SEMINOLE, FLORIDA FLORIDA 33772
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes..

John Rutland
Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

JOHN RUTLAND

8458 MONARCH CIRCLE

SEMINOLE, FL 33772

MGRM

LINDA RUTLAND

8458 MONARCH CIRCLE

SEMINOLE, FL 33772

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

John Rutland

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JOHN RUTLAND

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA