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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)922-4001

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

**FLORIDA PROFIT CORPORATION OR P.A.**

**KIWI CABINETRY, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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FILED  
01 JAN 31 AM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. McKnight JAN 31 2007

**ARTICLES OF INCORPORATION**  
**OF**

**KIWI CABINETRY, INC.**

The undersigned incorporation, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the corporation shall be:

**KIWI CABINETRY, INC.**

The principal place of business of this corporation shall be:

**7820 ABBOTT AVE # 4  
MIAMI BEACH, FL 33141**

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory, or nation.

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1000 shares

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

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**ARTICLE V OFFICERS DIRECTORS**

The name and street address of the initial officer and director, if any, who shall hold office the first year of the corporation's existence or until their successor is elected, is:

President: LESLIE R. THORPE  
Vice-President: STEVEN HART  
7820 Abbott Ave. # 4  
Miami Beach, FL 33141

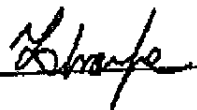
**ARTICLE VI INCORPORATOR**

The name and street address of the incorporator to these articles of incorporation is:

LESLIE R. THORPE  
7820 Abbott Ave. # 4  
Miami Beach, FL 33141

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 30th Day of January, 2001.

Signature of Incorporator

\_\_\_\_\_

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

KIWI CABINETRY, INC.

2. The name and address of the registered agent and office is:

LESLIE R. THORPE  
7820 Abbott Ave. # 4  
Miami Beach, FL 33141

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Signature *Leslie R. Thorpe*

Title President

Date 01/30/01

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and obligations of Section 607.325, Florida Statutes.

Signature *Leslie R. Thorpe*

Date 01/30/01