

500003877135--3 -03/19/01--01088--013 ****122.50 *****78.75

SUBJ	An	merican Cabir	netry Of Florid	a Inc.	
0000		Proposed corpora	te name - must include	suffix)	
Enclos for :	sed is an original	and one (1) co	py of the articles o	f incorporation ar	nd a check
	\$70.00	*78.75	★ \$122.50	= \$131.25	
	FROM:	Nam	n Cabintry Of F. e (printed or typed) 13th Ave.	lorida Inc.	01 MAR 19 SECRETARY TALLAHASSE
		Boca Ra	Address aton Fl. 33486	·	
•		C	ity, State & Zip		9: 45 GRIDA
		(561) 4	45-4193		
		Descion	Telephone number		

NOTE: Please provide the original and one copy of the articles.



ARTICLES OF INCORPORATION

01 MAR 19 AM 9: 46
SECRETAIN OF STATE
TALLAHASSEE FLORIDA

OF

American Cabinetry Of Florida Inc.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE ! NAME

The name of the corporation shall be:

American Cabinetry Of Florida Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

525 NW 13th Ave. Boca Raton Fl. 33486

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Marian Albini 525 NW 13th Ave.

Boca Raton Fl. 33486

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporation is(are):

Marian Albini 525 NW 13th Ave. Boca Raton Fl. 33486

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

26th day of February 19 2001.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 507.0501 or 617.0501, 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 PLORIDA.

2. The name ar	nd address of the registered agent and office is:	O1/P
	Marian Albini	OTMAR 19 SECRETATION ALLAHASSI
	(Name)	<u> </u>
	525 NW 13th Ave.	프로 크
-	(P.O. Box not acceptable)	
	Boca Raton Fl. 33486	ATE RIDA
سنب	(City/State/Zip)	

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL