

TRANSMITTAL LETTER
P020880038275

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 APR -9 AM 9:48

SUBJECT: KITCHEN DREAMS INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: JAMES R. DAY
Name (Printed or typed)

4815 E. BUSH BLVD (111)
Address

TAMPA FL 33617
City, State & Zip

813 238 4141
Daytime Telephone number

700005136657--6
-03/20/02--01051--004
*****70.00 *****70.00

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

~~04-9-02~~
WC



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 26, 2002

JAMES R. DAY
4815 E. BUSCH BLVD. (111)
TAMPA, FL 33617

SUBJECT: KITCHEN DREAMS INC
Ref. Number: W02000008466

We have received your document for KITCHEN DREAMS INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham
Document Specialist
New Filing Section

Letter Number: 702A00018070

PLEASE SEE CHANGE OF NAME

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:

KITCHEN DREAM CABINETS INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

4815 E. BUSCH BLVD (111)
TAMPA FL 33617

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SELLING CABINETRY

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JAMES R. DAY
4815 E. BUSCH BLVD (111)
TAMPA FL 33617
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

JAMES R. DAY
4815 E. BUSCH BLVD (111)
TAMPA FL 33617

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES R. DAY
4815 E. BUSCH BLVD (111)
TAMPA FL 33617

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

Signature/Registered Agent

Date

3/18/02

Signature/Incorporator

Date

3/18/02

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 APR -9 AM 9:14