

TRANSMITTAL LETTER

P0200000 72272

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

SUBJECT: Capital City Cabinet Center, Inc
(Proposed corporate name - must include suffix)

800006154608--3
-07/02/02--01024--017
*****78.75 *****78.75

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: Ann Swain Decker
Name (Printed or typed)

9750 Centerville Road
Address

Tallahassee, FL 32309
City, State & Zip

850-216-2828
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JUL -2 AM 10:38
RECEIVED
02 JUL -2 AM 10:35
DIVISION OF CORPORATION

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

7/2
95

ARTICLES OF INCORPORATION

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 I NAME

The name of the corporation shall be: CAPITAL CITY CABINET CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
3680 WEEMS RD.
TALLAHASSEE, FL. 32311

ARTICLE III SHARES

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

500 SHARES PAR VALUE OF \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: ANN SWAIN DEVEER
9750 CENTERVILLE RD.
TALLAHASSEE, FL. 32309

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FROM :

FAX NO. : 8506566607

May. 10 2002 10:41AM P2

ARTICLE V INCORPORATOR(S)
See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of
Incorporation is (are): ANN SWAIN DEVEER
9750 CENTERVILLE RD.
TALLAHASSEE, FL. 32309

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this
12 day of July, 2002.

(An additional article must be added if an effective date is requested.)

Ann S. DeVeer

Signature

Signature

Signature

Notarization is not required

Note: affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

**PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 FLORIDA.**

1. The name of the corporation is: CAPITAL CITY CABINET CENTER, INC.

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

ANN SWAIN DEVEER

(Name)

9750 CENTERVILLE RD.

(P.O.Box or Mail Drop Box **NOT** acceptable)

TALLAHASSEE, FL. 32309

(City/State/zip)

Having been named as registered agent and to accept service of process for the above stated corporation 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

FROM :

FAX NO. : 8506566607

May. 10 2002 10:44AM P1

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.

Ann S. DeVeen
(Signature)

7/1/02
(date)

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

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