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LAZARUS CORPORATE FILING S	ERVICE		
3320 S.W. 87 AVENUE			DIVIS 02/
MIAMI, FLORIDA (305)552-5973			

TERESA ROMAN (TALLAHASSEE REPRES	ENTATIVE)	OTTICE USE ONLY	
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CORPORATION NAME(s) & DOCUM	TEN F NUMB	ER(S) (if known):	59 59
1. CORVOS CABIN	ETS II	TALLA [ION INC.
2. (Corporation Nation)		***************************************	
(Corporation Manus)		(Document *)	0071096118 -08/14/02-01016022
(Corporation Haute)		(Decement #)	******78.75 ******78.75
4. (Corporation Name)		(Document #)	
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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:

CORVO'S CABINETS INSTAllatiON INC.

DIVISION OF CONFORMALIANS

02 AUG 14 PH 1: 18

ARTICLE II - PRINCIPAL OFFICE

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

20530 500 117 Ave Ulami FL , 33177

ARTICLE III -SHARES

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

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

20530 800 117 aul Miami FL, 33177 Apiel Corvo

ARTICLE V - INCORPORATOR

Incorporation is: ARIEL CORNO 20630 500 117 ANI LIAMI FL 33177	s of	
The undersigned incorporator has executed these Articles of Incorporation this 13 day of Avgust 2002 Signature	02 AUG 14	DIVISION OF C
ARTICLE VI- DIRECTOR(S)	PH I:	
The name(s) and street address(es) of the director(s) to these Ari Incorporation is (are): Apiel Corvo (President) 20530 500 117 and Wiami FL 33177	Ticles	ōf

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature