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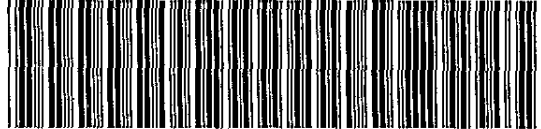
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03 NOV 20 AM 10:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12-2-03  
20-6-03

**WILLIAM E. RAIKES, III**  
**Attorney at Law**

(772) 595-6654  
Fax (772) 465-0593  
Courthouse Box 82

302 South Second Street  
Suite 101  
Fort Pierce, Florida 34950

November 18, 2003

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

**RE: VINSON'S CABINET INSTALLATION, INC.**

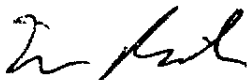
Dear Sir or Madam:

Enclosed please find original and one copy of the Articles of Incorporation for the above-referenced corporation. Also enclosed is Mr. Raikes' check for the following:

Filing fee	\$70.00
Certified Copy of Articles	<u>8.75</u>
<b>Amount of check</b>	<b>\$78.75</b>

Thank you for your prompt attention to this matter. If you have any questions, please feel free to contact me.

Very truly yours,



William E. Raikes, III

WER/tkk  
enclosures

**ARTICLES OF INCORPORATION**  
**OF**  
**VINSON'S CABINET INSTALLATION, INC.**

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TALLAHASSEE, FLORIDA

**ARTICLE I**

**NAME**

The name of this corporation is Vinson's Cabinet Installation, Inc.

**ARTICLE II**

**NATURE OF BUSINESS**

The nature of business to be transacted by the corporation shall be: cabinet installation and any other business which may be lawfully carried out by a Florida corporation.

**ARTICLE III**

**CAPITAL STOCK**

This Corporation shall have one (1) class of common stock having a par value of One Dollar (\$1.00) per share and the same shall be fully paid and non-assessable. The maximum number of shares of said stock this Corporation is authorized to have outstanding at any one time is Seven Thousand (7,000) shares.

#### **ARTICLE IV**

##### **INITIAL CAPITAL**

The amount of capital with which this Corporation shall begin business is Five Hundred (\$500.00) Dollars.

#### **ARTICLE V**

##### **TERM OF EXISTENCE**

This corporation shall have perpetual existence.

#### **ARTICLE VI**

##### **ADDRESS**

The initial street address of the principal office of this Corporation in the State of Florida is: 4960 Conley Place, Fort Pierce, Florida 34951. The Board of Directors may from time to time move the principal office to any other address in the State of Florida.

#### **ARTICLE VII**

##### **DIRECTORS**

This Corporation shall initially have two (2) Directors. The number of Directors may be increased or diminished from time to time by the By-Laws adopted by the stockholder, but shall never be less than one (1).

**ARTICLE VIII**

**INITIAL DIRECTOR**

The names and addresses of the initial Directors are:

<b><u>NAME</u></b>	<b><u>ADDRESS</u></b>
Connie M. Vinson	4960 Conley Place Fort Pierce, Florida 34951
Ronald A. Vinson, Sr.	4960 Conley Place Fort Pierce, Florida 34951

**ARTICLE IX**

**SUBSCRIBER**

The name and address of the Subscriber of these Articles of Incorporation is as follows:

<b><u>NAME</u></b>	<b><u>ADDRESS</u></b>
Connie M. Vinson	4960 Conley Place Fort Pierce, Florida 34951

**ARTICLE X**

**REGISTERED RESIDENT AGENT AND REGISTERED OFFICE**

The name and address of the Registered Resident Agent and her Registered Office to accept service of process within the State for this Corporation is:

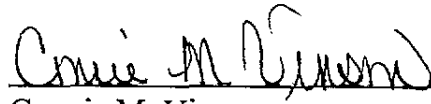
<b><u>NAME</u></b>	<b><u>ADDRESS</u></b>
Connie M. Vinson	4960 Conley Place Fort Pierce, Florida 34951

**ARTICLE XI**

**AMENDMENTS**

These Articles of Incorporation may be amended in the manner provided by law. Each amendment shall be approved by the Board of Directors, proposed by them to the Stockholders and approved at a Stockholders meeting by a majority of the Stockholders entitled to vote thereon; provided, however, amendments may also be made to these Articles of Incorporation upon all of the Directors and Stockholders signing a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

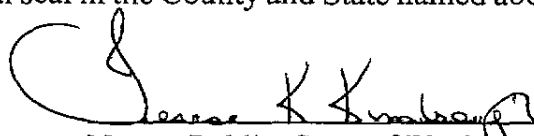
IN WITNESS WHEREOF, the undersigned subscribing Incorporator and Subscriber, a natural person competent to contract, hereunto sets her hand and seal this 17<sup>th</sup> day of November, 2003.

  
\_\_\_\_\_  
Connie M. Vinson

STATE OF FLORIDA  
COUNTY OF ST. LUCIE

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County aforesaid to take acknowledgments, personally appeared CONNIE M. VINSON, who is personally known to me or who did provide Florida's Driver's License identification, and who executed the foregoing Articles of Incorporation, and he/she acknowledged before me that she executed and subscribed to these Articles of Incorporation.

Witness my hand and official seal in the County and State named above this 17<sup>th</sup> day of November, 2003.

  
\_\_\_\_\_  
Notary Public, State of Florida



**ACKNOWLEDGMENT OF  
REGISTERED RESIDENT AGENT**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Having been named Registered Resident Agent to accept service of process for Vinson's Cabinet Installation, Inc., at the place designated in this certificate, I hereby accept the designation as Registered Resident Agent and agree to comply with all of the provisions of Chapter 48, Florida Statutes, as amended.



Connie M. Vinson  
Registered Resident Agent