

P04 0000001396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

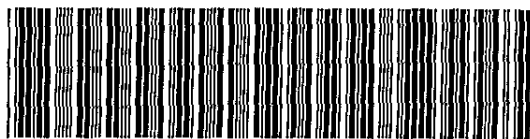
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300025648283

EFFECTIVE DATE

01-01-04

12/22/03--01018--008 **78.75

1-5-04

TRANSMITTAL LETTER

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

SUBJECT: Quality Wood Inc.
(PROPOSED CORPORATION) (NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Robert F. Cray
Name (Print or typed)

5452 49th Ave

St Petersburg 33709

City Zip

727-515-1965

525

Daytime Telephone Number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (it)

ARTICLE I NAME

The name of the corporation shall be:

Quality Wood S Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5452 49th Ave
St Petersburg 3709

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Manufacture W abinets.

ARTICLE IV SHARES

The number of shares of stock is:

1000 Shares

ARTICLE V INITIAL OFFICERS AND/OR TORS

List name(s), address(es) and specific title(s):

Robert F Crav resident
5452 49th Ave
St Petersburg 3709

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered

Robert F Crav
5452 49th Ave
St Petersburg 3709

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert F Crav
5452 49th Ave
St Petersburg 3709

ARTICLE VIII EFFECTIVE DATE

January 01, 2004

Having been named as registered agent to accept service of process 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

✓ Robert F. Craven
Robert F Craven
Signature/Registered Agent

✓ 12-16-03
Date

✓ Robert F. Craven
Robert F Craven
Signature/Incorporator

✓ 12-16-03
Date