

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0381

Account Name : INCORPORATETIME.COM, INC.

Account Number : I19990000221

Phone : (631)218-1510 Fax Number : (631)589-2848

FLORIDA PROFIT CORPORATION OR P.A.

Bob Kay's Cabinet Installation, Inc.

Certificate of Status	0
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ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATION FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I -NAME

THE NAME OF THE CORPORATION SHALL BE:

Bob Kay's Cabinet Installation, Inc.

ARTICLE IL -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

18217 Porsche Place Spring Hill, FL 34610

ARTICLE III -SHARES

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

2000 shares at \$.01 par value

ARTICLE IV -INITIAL OFFICERS/DIRECTORS:

President:

Robert Kay

18217 Porsche Place, Spring Hill, FL 34610

V.President: Robert Key

18217 Porsche Place, Spring Hill, FL 34610

Treasurer:

Gina Kasmark

18217 Porsche Place, Spring Hill, FL 34610

Secretary:

Gina Kasmark

18217 Porsche Place, Spring Hill, FL 34610

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Director:

Robert Kay

18217 Porsche Place, Spring Hill, FL 34610

Director:

Gina Kasmark

18217 Porsche Place, Spring Hill, FL 34610

Director:

Robert Kay

18217 Porsche Place, Spring Hill, FL 34610

ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address of the initial registered egont are:

Gina Kasmark 18217 Porsche Place Spring Hill, FL 34610

ARTICLE VI-INCORPORATOR:

The name and address of the incorporator to these Articles of Incorporation are:

Kerry Walsh IncorporateTime.com, Inc. 35-37 Carleton Avenue, Suite 200 Islip Terrace. NY 11752

Kerry Walsh, Incorporator

Date

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

Gina Kasmark, Registered Agent

Date

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