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04 APR 22 PM 5:31
SEAL
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Tri-County Cabinets, Inc.
(PROPOSED CORPORATE 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: Douglas Cates
Name (Printed or typed)

2565 N.E. 50th Pl.
Address

Ocala Fl. 34479
City, State & Zip

(352) 209-2647
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. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Tri-County Cabinets, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2565 N.E. 50th Pl
Ocala, Fl. 34479

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

One Thousand (1000)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Douglas Cates
2565 N.E. 50th Pl.
Ocala, Fl. 34479

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Douglas Cates
2565 N.E. 50th Pl.
Ocala, Fl. 34479

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Douglas Cates
2565 N.E. 50th Pl,
Ocala, Fl. 34479

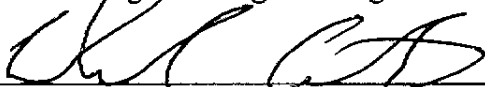
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4-17-04

Date



Signature/Incorporator

4-17-04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA