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TRANSMITTAL LETTER

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

SUBJECT:	CABINEI CONCEPIS, INC.		
		 -	
Enclosed is an or	riginal and one (1) copy of the Certificate	e of Domestication and a check for:	
FEES:			
	te of Domestication	\$50.00	
Articles of Incorporation and Certified Copy Total to domesticate and file		<u>\$78.75</u> \$128.75	
	•		
OPTIONAL:			
Certifica	te of Status	\$ 8.75	
FROM:	John S. Dzurak, Esq. Name (Printed or		
	Name (Finited of	typed)	
	306 E. Olympia Avenue		
Address			
	Punta Gorda, Florida 33950)	
City, State & Zip			
	(941) 639-3171		
	Daytime Telephone	number	

JOHN S. DZURÁK

ATTORNEY AT LAW

FEIN Number 65-0585025 Certified Circuit Civil Mediator Certified Family Law Mediator

Mailing Address: Post Office Box 510400 Punta Gorda, Florida 33951-0400

Phone: (941) 639-3171 Fax. (941+639-3634

June 29, 2004

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

Re: Cabinet Concepts, Inc.
Ref. Number W04000023202

Dear Sirs:

Please find enclosed the following:

- 1. A copy of your Department's June 16, 2004 letter.
- 2. Original and one copy of Certificate of Domestication and Articles of Incorporation for Cabinet Concepts, Inc.
- 3. Certified copies of Articles of Incorporation for Cabinet Concepts, Inc. filed with the Pennsylvania Department of State along with a Certificate of Good Standing.

Please provide proof of filing and document number to our office.

Sincerely,

dhn S. Dzurak, Esq.

Encs.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 16, 2004

JOHN S. DZURAK, ESQ. P.O.BOX 510400 PUNTA GORDA, FL 33951-0400

SUBJECT: CABINET CONCEPTS, INC.

Ref. Number: W04000023202

We have received your document for CABINET CONCEPTS, INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Domestications must be filed pursurant to florida statutes 607.0202 & 607.1801.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Cynthia Blalock Document Specialist New Filings Section

Letter Number: 404A00040236

CERTIFICATE OF DOMESTICATION

ίD	ie undersigned,	Michael A. Decker	, President
		(Name)	(Title)
of	CABINE	T CONCEPTS, INC.	a foreign Corporatio
in	accordance with F.	(Corporation Name) S., 607.1801 does hereby certify:	
			June 8 , 1993
2.		_	as first formed, incorporated, or otherwi
		was <u>Pennsylvania</u>	
3.		orporation immediately prior to the fil	ing of this Certificate of Domestication
4.	The name of the c	orporation, as set forth in its articles of	f incorporation, to be filed pursuant to
		07.0401 with this certificate isCA	· -
5.	administration of t	at constituted the seat, siege, social price to the filing of the Certificate of Dome Pennsylvania	t thereto under applicable law
6.	Attached are Florie to s. 607.1801.	da articles of incorporation to complet	e the domestication requirements pursua
I aı	n <u>President</u>	, ofCABINET CONCEPTS. IN	С.
anc	l am authorized to s	sign this certificate of Domestication o	n behalf of the corporation and have do
	this the <u>30 The</u> day of		, 2004 lese
	~	Filing Fee:	650.00
		ertificate of Domestication rticles of Incorporation and Certifie	\$50.00 ed Copy \$78.75
		otal to domesticate and file	\$128.75

ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of the corporation shall be:

CABINET CONCEPTS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2260 Palm Tree Drive

Punta Gorda, Florida 33950

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: the operation of a

manufacturer's representative's business.

<u>ARTICLE IV SHARES</u>

The number of shares of stock is:

1,000 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es): See attached sheet.

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are: Michael A. Decker

2260 Palm Tree Drive

Punta Gorda, Florida 33950

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Michael A. Decker

2260 Palm Tree Drive

Punta Gorda, Florida 33950

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

Signature/Registered Agent

Machael A. Decker

Michael R. Deckor

Signature/Incorporator

June 30, 2004

Date

June 30, 2004

Date

12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Chairman: Michael A. Decker 2260 Palm Tree Drive Address: __ Punta Gorda, Florida 33950 Vice Chairman: <u>Celia L. Decker</u> 2260 Palm Tree Drive Address: _____ Punta Gorda, Florida 33950 Address: _____ Director: Address: __ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Michael A. Decker 2260 Palm Tree Drive Address: _____ Punta Gorda, Florida 33950 Vice President: Celia L. Decker 2260 Palm Tree Drive Address: _ Punta Gorda, Florida 33950 Secretary: Celia L. Decker 2260 Palm Tree Drive Address: _____ Punta Gorda, Florida 33950 Celia L. Decker Treasurer: _____ Address: _____ 2260 Palm Tree Drive Punta Gorda, Florida 33950 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

Michael Decker, President and Chairman of Board of Directors (Typed or printed name and capacity of person signing application)