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TRANSMITTAL LETTER

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

SUBJECT: <u>C,/</u>	assic Design Proposed corpor	Kitchen & ATE NAME - MUST INCL	Bath, I)	nc,
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:	•
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Donato Div	(Printed or typed)		
	9287 NE 40	THAUC, Address		C4 0CT -
-	Ocala, FL	34470 State & Zin		7-7

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be:	
Classic Design Kitchen & Bath, Inc.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: 3660 NE 42 nd. Lone	
ocala, FL 34479	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Furniture Design & Manutacturing (wood)	
ARTICLE IV SHARES	
The number of shares of stock is:	
20	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	<u> </u>
List name(s), address(es) and specific title(s):	6. 000
Donato DiMuro - Owner	ا •
agas NE 45th Ave,	; 7
	and all the second seco
Ocala, FL 34470	Ďο
	2: 30
The name and Florida street address (F.O. Pay NOT assentable) of the registered agent is:	_
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:	
Donato DiMuro	
2225 NE 45th Ave.	
Ocala, FL 34470	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Donato DiMuro	
agas NE 45th Ave.	
Ocala, FL 34470	
**************************************	********** decimented in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	designated in this
$\Lambda \rightarrow \Lambda \rightarrow$	
10-4-C)4_
Signature/Registered Agent Date	
1 durant 1 de la	
10-4-0	24
Signature/Incorporator Date	•