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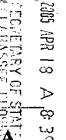
Account Name : FAS-T CORP. AGENTS, INC.

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# FLORIDA PROFIT CORPORATION OR P.A.

## CLASSY KITCHEN CABINET INC.

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#### ARTICLE OF INCORPORATION

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#### CLASSY KITCHEN CABINET INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

CLASSY KITCHEN GABINET INC.

The principal place of business of this corporation shall be: 13740 NW. 19 AVE. OPA LOCKA, FL. 33054

#### ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

 $100 \times $10.00 = $1,000.00$ 

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1.	The name of the corporation is:	
	CLASSY KITCHEN CABINET INC.	
2.	The name and address of the registered agent and office	
•	is MARIA LOURDES RODRIGUEZ	
	(Name)	
	5900 Palm Trace Ldgs.DR. # [11	
	5900 Palm Trace Ldgs.DR. # [11] (F. O. BOX NOT ACCEPTABLE)	
	DAVIE, FLORIDA 33314 (CITY/STATE/ZIP)	
	(CITY/STATE/ZIF)	
OF F AS R THER REI,A AND	ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIBLEGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES TING TO THE PROPER AND COMPLETS PERFORMACE OF MY DUTIES I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY TION AS MY POSITION AS REGISTERED AGENT.	
	SIGNATURE HONIAGE ROCKIEGUE	
	DATE 4-9-05	

### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

MARIA LOURDES RODRIGUEZ
5900 Palm Trace Ldgs.Dr. # 111
Davie,Florida 33314

DIRECTOR

#### ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

MARIA LOURDES RODRIGUEZ
5900 Palm Trace Ldgs Dr. # 111
Davie,Florida 33314

PRESIDENT, SECRETARY & TREASURER 100 shares

The undersigned has(have) executed these Article of Incorporation this 9 th. day of April ,2005.

Signature/Title

Signature/Title