

Division of Corporations

Page 1 of 1

POS000081416

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000140522 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : MCLIN & BURNSED P.A.
Account Number : 104657003604
Phone : (352) 753-4690
Fax Number : (352) 751-4993

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

05 JUN -6 AM 9:19

FILED

FLORIDA PROFIT CORPORATION OR P.A.

Cabinetree Garage Storage Solutions, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

6/7/05
BWK

Electronic Filing Menu

Corporate Filing

Public Access Help

((H05000140522 3)))

FILED

05 JUN -6 AM 9:19

**ARTICLES OF INCORPORATION
OF
CABINETREE GARAGE STORAGE SOLUTIONS, INC.**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as incorporator of a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation:

ARTICLE I. NAME

The name of this corporation is Cabinetree Garage Storage Solutions, Inc.

ARTICLE II. PRINCIPAL OFFICE OR MAILING ADDRESS OF CORPORATION

The street address of the Corporation's principal office of this corporation is: 1116 Bichara Boulevard, The Villages, Florida 32159. The mailing address of this corporation is: 1116 Bichara Boulevard, The Villages, Florida 32159.

ARTICLE III. CAPITAL STOCK

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

Five thousand (5,000) shares of common stock all of one class, having a nominal or par value of ONE DOLLAR (\$1.00) per share.

ARTICLE IV. INITIAL OFFICERS AND DIRECTORS

The names and addresses of the initial Directors are as follows:

Douglas Hampton	12520 Fade Drive, Grand Island, Florida 32735
David L. Schwartz	1116 Bichara Boulevard, The Villages, Florida 32159
Glynn L. Wallace	1116 Bichara Boulevard, The Villages, Florida 32159

The names and addresses of the initial officers are as follows:

David L. Schwartz	President	1116 Bichara Boulevard, The Villages, Florida 32159
Douglas Hampton	Treasurer	12520 Fade Drive, Grand Island, Florida 32735
Glynn L. Wallace	Secretary	1116 Bichara Boulevard, The Villages, Florida 32159

ARTICLE V. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered agent of this corporation is 12520 Fade Drive,

((H05000140522 3)))

((H05000140522 3)))

Grand Island, Florida 32735. The name of the initial registered agent of this corporation at that address is Douglas Hampton.

ARTICLE VI. INCORPORATOR

The name and address of the Incorporator is Douglas Hampton, 12520 Fade Drive, Grand Island, Florida 32735.

ARTICLE VII. AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

ARTICLE VIII. INDEMNIFICATION

The Corporation shall indemnify its officers and directors to the fullest extent permitted by the Florida Business Corporation Act.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 6th day of June, 2005.


Douglas Hampton
Incorporator

ACCEPTANCE BY REGISTERED AGENT:

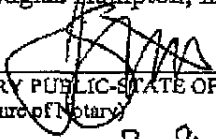
I AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID CORPORATION.


Douglas Hampton

(((H05000140522 3)))

STATE OF FLORIDA
COUNTY OF SUMTER

The foregoing instrument was acknowledged before me this 6th day of June, 2005,
by Douglas Hampton, Incorporator, who did not take an oath.


NOTARY PUBLIC-STATE OF FLORIDA
(Signature of Notary)

JEFFREY P. SKATES
(Typed name of Notary)



JEFFREY P. SKATES
MY COMMISSION # DD 423644
EXPIRES: May 22, 2009
Bonded thru Budget Notary Services

(Commission Number)

Personally known _____ or
Produced Identification _____

Type of Identification _____
Produced: _____

(((H05000140522 3)))