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### TRANSMITTAL LETTER

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

	Æ	1+0 Custon	CABINETS, INC	•	
SUB.	JECT:	acres Cosse	CABINETS, INC	, tol 5.	
(Proposed corporate name - must include suffix)					
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for :	विकास कि है। का प्राप्तिताका	and out (1) cob	A Di tim diticies oi	incorporation and a circu	
·	图 \$70.00	<b>⊠ \$78.75</b>	<b>122.50</b>	<b>\$131.25</b>	
	FROM:	GENE	ALLAN KEMBLE	TL	
Name (printed or typed)					
		825	N. 61ST AVE		
			Address		
		Ocas .	. 6 225716		
PENSACOLA , G. 32.506  City, State & Zip					
		1 70	000 /		
		678 Daytime	877 6088 Telephone number		

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



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 5, 2005

GENE ALLAN KEMBLE 825 N. 61ST AVE. PENSACOLA, FL 32506

SUBJECT: A & D CUSTOM CABINETS, INC.

Ref. Number: W05000045788

We have received your document for A & D CUSTOM CABINETS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2006 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6840.

Bruce W Kitchens Document Specialist New Filings Section

Letter Number: 705A00060400

P:2

## ARTICLES OF INCORPORATION

OF

AND CUSTOM CABINETS, INC.

FILED

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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

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

#### ARTICLE | NAME

The name of the corporation shall be:

A+D CUSTOM CABINETS INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

825 N. 612 AVE PENSACOLA , FL. 32506

#### ARTICLE III SHARES

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

/00

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GENE AKEMBLE M

825 NG1 STAVE

## ARTICLE V INCORPORATORISI

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

GENE ACLAN KEMBLE TR. 825 N. 615 AVE PENSACOLI, FL. 32506

DAWN MARIE KEMBLE
825 N. 61ST AVE
PENSACOLA , FZ 32506

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

28th day of SEPT 15005

Signature

Articles of Incorporation Filing Fee - \$35

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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.

	A+D Custon CABINETS, INC.		
1. The mame of	the corporation is: Authory Grammas American		
1. Ole timore of			
ì			
2. The name ar	d address of the registered agent and office is:		
	·		
	GENE ALLAN KEMBIE ON (Name)		
<del></del>	(Name)		
	ene at tist aux		
(P.O. Box not acceptable)			
<u> </u>	PENSACOLA ,FC. 3250L		
	(City/State/Zip)		

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.

