P0500152892

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

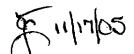
Office Use Only



500061031595

1911 - Brand Marie 1914 - 1914 - 19





TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 2005 NGV 16 PM 2: 31 TALLAHASSEE FLORIDA

£ 1. 1.

SUBJECT:	Thomas Fox	Cabineth	y Inc	
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	a check for:	
_				
\$70.00	□/ \$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
	& Confidence of Status	& Columna Copy	& Certificate of	
			Status	
		ADDITIONAL CO	PY REQUIRED	
	Roma Ra	Fail	•	
FROM:	Name (Printed or typed)			
	readic (Finica of types)			
	58 Sidux Circle			
·	Address			
11.12 1.22				
	Havana H 32333			
	City, State & Zip			
(850) 539-5(71				
Daytime Telephone number				

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

In compliance with Chapter out and/of Chapter 021, 1.5. (110th)	
ARTICLE I NAME The name of the corporation shall be:	4
Thomas Fox Cabinetry Inc	2005 NGV 16 PM 2: 31
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 38 Hyde Rd	TALLAHASSEE FLORIDA
Thomas V. I le, Ga 31757 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Calainetry	
ARTICLE IV SHARES The number of shares of stock is:	
List name(s), address(es) and specific title(s): Earl Willough by Jr 38 Hyde Rd Thomas Joshua Cone -	sville, Ga 31757- President u Vice President
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> of the registered agent is: Ron Benfield	
58 Sionx Circle	
Havana, F1 32333	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: Ron Ben fre Id	
S& Sidny Circle	
Havana, Fl 32333	************
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and	e stated corporation at the place designated in this
Kin Blod Signature/Registered Agent	11/10/05 Date
Ron Bfd	11/16/05
Signature/Incorporator	Date'