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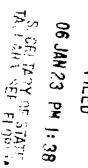
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PICK-UP WAIT MAIL				
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J. Shivers JAN 26 2005

COVER LETTER

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

SUBJECT: The Cabinet Shade Tree, (PROPOSED CORPORA	, Inc. Tename – <u>Mustingl</u>	UDBSUTTX)			
Enclosed are an original and one (1) copy of the article \$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
FROM: Elizabeth L. Lea			Ä	_	
P.O. Box 196128 Winter Springs, FL 327 City,	(Printed or typed) Address 19-6128 State & Zip		SLORFTARY OF STATE	OBJAN 23 PM	コニョコ
(407) 388-2082	elenhone number				

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

. ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

The Cabinet Shade Tree, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O. Box 196128

Winter Springs, FL 32719-6128

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

design of cabinets and window treatments

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Elizabeth L. Lea - President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

263 Minorca Beach Way, Unit 805, New Smyrna Beach, FL 32169Eli

Elizabeth L. Les

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Elizabeth L. Lea, 263 Minorca Beach Way, Unit 805, New Smyrna Beach, FL 32169

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity