

P060000063553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

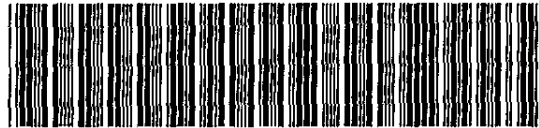
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600072692306

05/05/06--01024--006 **78.75

EFFECTIVE DATE
05/08/06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2006 MAY -5 PM 2:50

TRANSMITTAL LETTER

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32314

SUBJECT: CNI CABINET SHOP, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: A BETTER BUSINESS & TAX SERVICE
Name (Printed or typed)

600 Goodlette Road North, Ste. 104
Address

Naples, FL 34102
City, State & Zip

941-263-0829
Daytime Telephone number

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

**CNI CABINET SHOP, INC.
3725 20TH AVENUE SOUTHEAST
NAPLES, FLORIDA 34117**

Department of State-Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Filing of Articles of Incorporation for **CNI CABINET SHOP, INC.**

Dear Sirs:

I enclose the original of the Articles of Incorporation for **CNI CABINET SHOP, INC.** Further enclosed is my check in the amount of \$78.75 payable to the Florida Department of State.

Please file the original of the Articles and return your receipt and Certified Copy.

If you have any further questions or require additional information, please do not hesitate to contact me.

Thank you for your assistance in this matter.

Very truly yours,



CARLOS L. VIENES, President

HW/jaa

Enclosures

Fees as follow:

Certified Copy
Filing Fee for Articles
Registered Agent

ARTICLES OF INCORPORATION
Of

CNI CABINET SHOP, INC.

EFFECTIVE DATE
05/08/06

The undersigned, for the purposes of forming a Corporation under Section 607.164 of the Florida General Corporation Act, do hereby certify as follows:

Article I
Corporate Name and Address

The name of the Corporation is **CNI CABINET SHOP, INC.**, and the street address of the Corporation is:

**3725 20TH AVENUE SOUTHEAST
NAPLES, FLORIDA 34117**

Article II
Corporate Purposes

The Corporation is organized to function as **CABINET MAKERS** and any related business services and to otherwise engage in any activity or business permitted under the laws of the United States of America and in the state of Florida.

Article III
Authorized Stock

The aggregate number of shares of the Corporation shall be 50,000, of which 1,000 are to be issued as voting common stock with a par value of \$1.00.

Article IV
Registered Office and Registered Agent

The street address of the initial registered office of the Corporation in the state of Florida shall be:

**3725 20TH AVENUE SOUTHEAST
NAPLES, FLORIDA 34117**

The name of the initial registered agent of the Corporation at the registered office shall be **CARLOS L. VIENES**.

FILED
2006 MAY -5 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article V
Initial Board of Directors

The initial Board of Directors of the Corporation shall be comprised of **TWO (2)** person(s). The name and address of the initial Director(s) is as follows:

<u>NAME</u>	<u>ADDRESS</u>
CARLOS L. VIENES	2036 NORTHWEST 2 ND PLACE CAPE CORAL, FLORIDA 33993
ISABEL VIENES	3725 20 TH AVENUE SOUTHEAST NAPLES, FLORIDA 34117

Article VI
Incorporator

The name and address of the Incorporator of the Corporation is:

CARLOS L. VIENES
2036 NORTHWEST 2ND PLACE
CAPE CORAL, FLORIDA 33993

Article VII
Commencement of Existence

The Corporation shall be deemed to commence on the **8TH** day of **MAY, 2006**.

Article VIII
Duration

The term of existence of the Corporation is perpetual. IN WITNESS WHEREOF,
the undersigned, as Incorporator has executed the foregoing Articles of Incorporation this
3RD day of MAY, 2006.

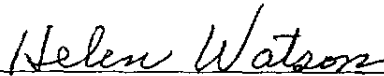
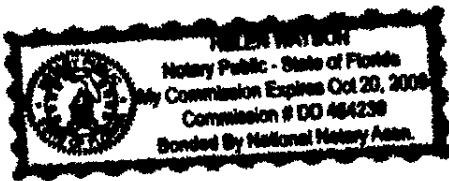


CARLOS L. VIENES
Incorporator

STATE OF FLORIDA

COLLIER COUNTY

Before me personally appeared **CARLOS L. VIENES** to me personally known to
be the person described as Incorporator and who executed the foregoing Articles of
Incorporation and acknowledged before me that **he** subscribed to these Articles of
Incorporation this 3RD day of MAY, 2006.



Notary Public, Helen Watson
My Commission Expires: 08-13-2005

**ACCEPTANCE OF REGISTERED AGENT
FOR**

CNI CABINET SHOP, INC.

I, **CARLOS L. VIENES**, having signed the within as registered agent of **CNI CABINET SHOP, INC.**, (the Corporation) at the registered address of **3725 20TH AVENUE SOUTHEAST, NAPLES, FLORIDA 34117**, do hereby agree as the registered agent to accept service of process. to keep an office of the Corporation open during the prescribed hours, and to post my name, **CARLOS L. VIENES**, and that of any officer of the Corporation authorized to accept service of process at the above Florida designated address, in some conspicuous place in the office of the Corporation as required by law.



CARLOS L. VIENES
Registered Agent