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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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06 JUL 11 PM 2: 04

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT:	CABINETRY & M	ILL WORK 501	LUTIONS IN
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM:	GABRIEL SILVA Name (Printed or typed) 11280 NW 16 th CT Address		
-	305 -	Pines FL 330 7, State & Zip 978 - 6276 Telephone number	026

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

i :

ARTICLES OF INCORPORATION

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

ARTICLE I

The name of the corporation shall be: CABINETRY & MILLWORK SOLUTIONS INC.-

ARTICLE II

The principal of business/mailing address is:

11280 NW 16th CT

PEMBROKE PINES, FL 33026

ARTICLE III

The purpose for which the corporation is organized is:

To contract professional subcontractors and offer the Customer a complete choice of cabinetry and millwork projects.-

The number of shares is: 100 shares.-

ARTICLE V

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

Name: GABRIEL SILVA

Address: 11280 NW 16th CT - PEMBROKE PINES, FL 33026

Title: President

Name: MARIA F. RAFFO

Address: 11280 NW 16th CT - PEMBROKE PINES, FL 33026

Title: VicePresident

Name: GABRIEL SILVA

Address: 11280 NW 16th CT - PEMBROKE PINES, FL 33026

Title: Treasurer

Name: GABRIEL SILVA -

Address: 11280 NW 16th CT - PEMBROKE PINES, FL 33026

Title: Secretary

ARTICLE VI

The name and Florida street address of the registered agent is:

GABRIEL SILVA 11280 NW 16th CT PEMBROKE PINES, FL 33026

ARTICLE VII

The name and address of the Incorporator is

GABRIEL SILVA 11280 NW 16th CT PEMBROKE PINES, FL 33026

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.

Signature/Registered Agent.

07 06 06 Date

Signature/Incorporator.

07 06 06 Date

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