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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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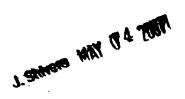


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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: Sup	perior Quality Cabinets, Inc.					
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)			
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:	_		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED			
FROM:	Omar Haber			_		
PROM.	Name	(Printed or typed)	· · · · · · · · · · · · · · · · · · ·	SECRE TALLAH	2007 MAY -4	
•	Address Fort Lauderdale, FL 33315			TARY OF ASSEE, F		FILED
	City, State & Zip (954) 812-1100			STATE FLORIDA	PM 1: 28	
-		elephone 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:

Superior Quality Cabinets, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1460 SW 32 Court, Fort Lauderdale, FL 33315

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Omar Haber, 1460 SW 32 Court, Fort Lauderdale, FL 33315, President

ARTICLE VI REGISTERED AGENT

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

Omar Haber, 1460 SW 32 Court, Fort Lauderdale, FL 33315

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Omar Haber, 1460 SW 32 Court, Fort Lauderdale, FL 33315

SECRETARY OF STATE TALLAHASSEF, FI ORION

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 after the appointment as registered agent and agree to act in this capacity

Signature/Registered-Agent

Signature/Incorporator

Date

Date