P09000025600

(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



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COVER LETTER

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

SUBJECT:	abinets by Desig	n, Inc.	Upe cuenty
	(PROPOSED CORPOR	ATE NAME – <u>MUST INC</u> I	LUDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
FROM:	William L. Good	(e (Printed or typed)	
	2385 Winterwood	Cir. E ·	
	Jacksonville FL	3 LL 10 y, State & Zip	
	904-226-9023 Daytime	Telephone number	

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



March 11, 2009

WILLIAM L GOODELL 2385 WINTERWOOD CIR E JACKSONVILLE, FL 32210

SUBJECT: CABINETS BY DESIGN, INC.

Ref. Number: W09000011532

We have received your document for CABINETS BY DESIGN, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 409A00008357

Paisley A Alford Clerk New Filing Section

Division of Corporations - P.O. ROY 6397 - Tallahasson, Florida 39314

. .. . 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: by Design, Inc. Southern Home Cabinets, Inc. ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 2385 Winterwood Circle East Jacksonville FL 32210 ARTICLE III PURPOSE The purpose for which the corporation is organized is: transacting any and all lawful business ARTICLE IV The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): William L. Goodell 2385 Winterwood cir. E. Jacksonville FL 32210 President ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: William L. Goodell 2385 Winterwood CirE. Jacksonville FL 32210 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: William L. Goodell 2385 Winterwood Cir.E. Jacksonville FL 32210 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 illiam K. Howclell Signature/Registered Agent Date

Date

Signature/Incorporator