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Florida Department of State  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
AC CABINET DISTRIBUTORS CORP.**

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H11000111303

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act. Hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be;  
AC CABINET DISTRIBUTORS CORP.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be;

720 W 27 St  
Hialeah Fl 33010

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is; 500 Shares value of \$1.00

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TALLAHASSEE FLORIDA

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS.

The name and address of the initial registered agent is;

GRETTEL GRANADILLO

720 W 27 St  
Hialeah FL 33010



ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) if the incorporator(s) to these Article of incorporation is (are);

Grettel Granadillo

720 W 27 St  
Hialeah FL 33010

ARTICLE VI DIRECTOR(S)

The name(s) and the street address(es) of the director(s) to these Articles of incorporation is (are);

Grettel Granadillo

720 W 27 St  
Hialeah FL 33010

The undersigned incorporator(s) has(have) executed these Articles of incorporation this 15 day of april, 2011

  
\_\_\_\_\_  
SIGNATURE

President Vicepresident

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA**H11000111383****CERTIFICATE OF DESIGNATION REGISTERED AGENT /****REGISTERED OFFICE.**

Pursuant to the provision of sections 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida,

1.- The name of the corporation is; \_\_\_\_\_  
AC CABINET DISTRIBUTORS CORP.

2.- The name and address of the registered agent and office is

\_\_\_\_\_  
GRETTEL GRANADILLO

NAME

\_\_\_\_\_  
720 W 27 St

\_\_\_\_\_  
P.O. BOX NOT ACCEPTABLE

\_\_\_\_\_  
Bialeah FL 33010

\_\_\_\_\_  
CITY/STATE/ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY, I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REG

  
\_\_\_\_\_  
SIGNATURE

15 day of

April, 2011

**H11000111383**