DE EQUIN PARKWAY N.C.
P.O. DRAWER 2107
FT. WALTON DEACH, FLORIDA 32549
(904) 244-0130 FAX (904) 244-2140

April 4 , 199 6

Corporate Records Division P.O. Box 6327 Tallahassee, FL 32314

Rei

Cabinet Solutions, Inc.

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Gentlemen:

Enclosed are the original and duplicate original copy of the Articles of Incorporation of the above named proposed corporation which have been properly executed.

Please endorse your approval of the Articles Incorporation on the duplicate copy, certify and return to me.

I also enclose Registered Agent designation for filing.

A check is enclosed in the amount of \$122.50 to cover the \$35 filing fee, \$52.50 for certified copy of the Articles and \$35 for registered Agent designation.

If you should have any question regarding the above, please contact me at the phone number listed above.

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FBE/lap

Sincerely,

F. B. Estergren, P.A.

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ARTICLES OF INCORPORATION

OF

CABINET SOLUTIONS, INC.

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ARTICLE I - NAME:

ARTICLE II - DURATION:

The name of this corporation is: CABINET SOLUTIONS, INC. hereinafter referred to as the ("Corporation")

The Corporation shall exist perpetually, commencing upon the filing of the Articles of Incorporation with the Department of State.

ARTICLE III - PURPOSE:

The Corporation is organized for the purpose of engaging in the Cabinet Sales and Installation business, and for the purpose of transacting any or all other lawful business not inconsistent with the Laws of the State of Florida.

ARTICLE IV - CAPITAL STOCK:

The Corporation is authorized to issue 100,000 shares of One Dollar (\$1.00) par value common stock.

ARTICLE V - PRE-EMPTIVE RIGHTS:

Every shareholder, upon the sale for cash of any new stock of the same kind, class or series as that which he or she already holds, shall have the right to purchase his or her pro-rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE-VI - INITIAL REGISTERED OFFICE AND AGENT:

The principal office and street address of the Corporation is: 271 Anderson Dr., Mary Esther, FL 32569, and the mailing address is: 271 Anderson Dr., Mary Esther, FL 32569.

The name of the registered agent of the corporation is: WESLEY D. NORTON, and the street office address of such

registered agent and registered office of the Corporation is: 271 Anderson Dr., Mary Esther, FL 32569.

ARTICLE VII - INITIAL BOARD OF DIRECTORS:

The Corporation shall have two directors initially. The number of directors may be either increased or decreased from time to time by the by-laws but shall never be less than one. The name and address of the initial directors of the Corporation are:

WESLEY D. NORTON, 271 Anderson Dr., Mary Esther, FL 32569.

SUSANNE NORTON, 271 Anderson Dr., Mary Esther, FL 32569.

ARTICLE VIII - INCORPORATOR:

The name and address of the person signing these Articles is: WESLEY D. NORTON, 271 Anderson Dr., Mary Esther, FL 32569.

ARTICLE IX - BY-LAWS:

The power to adopt, alter, amend or repeal the by-laws shall be vested in the Board of Directors and the shareholders.

ARTICLE X - SECTION 1244 STOCK:

It is the intent of this charter that the directors may sell the capital stock of the Corporation in accordance with the conditions of Sections 1242-1244, inclusive, of the Internal Revenue Code of 1954 as amended.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation on this 4% day of April, 1996.

Wesley D. norton WESLEY D. NORTON

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CERTIFICATE OF DESIGNATION DEGISTERED AGENT/DEGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

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1. The name of the corporation is:	
-	
CABINET SOLU	JTIONS, INC.
2. The name and address of the registere	ed agolit and office is:
WESLEY D. NO	DRTON
(NAME)	
271 Anderson	Dr.
(P.O. BOX <u>NOT</u> AC	
· ·	·
Mary Esther,	FL 32569
(CITY/STAT	
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THIS CERTIFICATE, I HEREBY ACCEPT AND AGREE TO ACT IN THIS CAPACITY PROVISIONS OF ALL STATUTES HELAT	ED AGENT AND TO ACCEPT SERVICE OF PRODUCTION AT THE PLACE DESIGNATED IN THE APPOINTMENT AS REGISTERED AGENT. I FURTHER AGREE TO COMPLY WITH THE ING TO THE PROPER AND COMPLETE PERFAMILIAR WITH AND ACCEPT THE OBLIGAD AGENT.
	SIGNATURE Wesley D. Norton Wesley D. Norton DATE 4/4/96