

P96000039684

Corporate Records Bureau  
Division of Corporations  
Department of State  
P.O. Box 6327  
Tallahassee, FL 32301

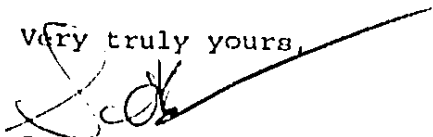
RE: Wood Accents, Inc.

Gentlemen:

Enclosed is an original and a copy of the Articles of Incorporation for the above referenced company and a copy of the Certificate of Domicile.

Also enclosed is our check in the amount of \$70.00 to cover the various fees. Please send an acknowledgment of receipt of these monies.

Very truly yours,

  
Scott J. Bridges

1718 80th Street N  
St. Petersburg, FL 33710

Dmc  
5/8/96

FILED  
96 MAY -3 AM 11:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

96 MAY -3 AM 11:56

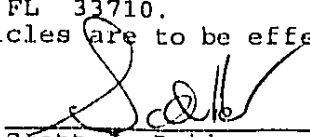
ARTICLES OF INCORPORATION  
OF

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Wood Accents, Inc.

1. NAME: The name of this corporation is: Wood Accents, Inc.
2. DURATION: The period of its duration is perpetual.
3. PURPOSE: The purpose is to engage in any activities or business permitted under the laws of the United States and of Florida.
4. CAPITAL STOCK: The corporation is authorized to issue 7,500 shares of \$1.00 par value common stock.
5. INITIAL REGISTERED AGENT AND OFFICE: The street address of its initial registered agent is: 1718 80th Street N. St. Petersburg, FL 33710 and the name of its initial registered agent at said address is: Scott J. Bridges.
6. MAILING ADDRESS OF CORPORATION: The complete mailing address of the Corporation is:  
Wood Accents, Inc.  
1718 80th Street N.  
St. Petersburg, FL 33710
7. INITIAL BOARD OF DIRECTORS: This corporation shall have one director, initially, and the name and address of the initial director is: Scott J. Bridges at 1718 80th Street N. St. Petersburg, FL 33710.
8. INCORPORATOR: The name and address of the person signing these Articles of Incorporation is: Scott J. Bridges at 1718 80th Street N. St. Petersburg, FL 33710.
9. EFFECTIVE DATE: These Articles are to be effective upon receipt.

DATED: 4-30-96

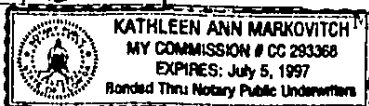
  
\_\_\_\_\_  
Scott J. Bridges

STATE OF FLORIDA  
COUNTY OF PINELLAS

I hereby certify, that on this day before me, an officer duly qualified to take acknowledgments, personally appeared Scott J. Bridges, to me known to be the person described in and who executed the foregoing Articles of Incorporation and acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 30th day of April, 1996.

  
\_\_\_\_\_  
NOTARY PUBLIC



Commission Expires: 7/5/97

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICES OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS  
MAY BE SERVED.

FILED  
JULY 3 1956  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

\_\_\_\_\_  
In pursuance of Chapter 48.091, Florida Statutes, the following is  
submitted, in compliance with said Act:

First - That Wood Accents, Inc., desiring to organize under the laws  
of the State of Florida with its principle offices located, as  
indicated in the Articles of Incorporation in the City of St.  
Petersburg, County of Pinellas, State of Florida, has named Scott J.  
Bridges located at 1718 80th Street N., in the City of St.  
Petersburg, County of Pinellas, State of Florida, as its agent to  
accept service of process within this State.

ACKNOWLEDGMENT:

Having been named to accept service of process for the above stated  
corporation, at the place designated in this certificate, I hereby  
accept to act in this capacity, and agree to comply with the  
provisions of said Act relative to keeping open said office.

BY: Scott J. Bridges  
(Resident Agent)

# P96000039684

Ced. Finishing Touch, Inc.  
Requestor's Name  
25734 Candlewick Ct.  
Address  
Westlake OH 44145  
City/State/Zip Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) **200002086562--0**  
-02/13/97--01025--004  
\*\*\*\*\*35.00 \*\*\*\*\*35.00
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED  
27 FEB -7 AM 10:37  
TALLAHASSEE, FLORIDA  
SH 2/12

FROM : ULTIMATE ACCENTS

PHONE NO. : 813 323 2993

Feb. 03 1997 10:01AM P2

Florida Department of State, Sandra B. Mortham, Secretary of State

OFFICER / DIRECTOR RESIGNATION

I, Dana M. Bax, hereby resign as Secretary  
(Title)  
of Wood Accents, Inc.  
(Name of Corporation)

a corporation organized under the laws of the State of Florida

That the corporation has been notified in writing of the resignation.

Dana M. Bax  
(Signature of resigning officer/director)

SWORN TO BEFORE ME A NOTARY PUBLIC THIS 4th DAY OF FEBRUARY 1997

Elizabeth A. Seevers, Notary Public



ELIZABETH A. SEEVERS  
Notary Public, State of Ohio  
Commission Expires July 23, 1998

FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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97 FEB -7 AM 10:37  
TALLAHASSEE, FLORIDA

# P96000039684

C+D Finishing Touch, Inc.  
Requestor's Name  
25734 Candlewick Ct.  
Address  
Westlake OH 44145  
City/State/Zip Phone #

500002001225  
-02/07/97-01036-0003  
\*\*\*\*\*35. CCI \*\*\*\*\*35. CCI

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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<input type="checkbox"/>	Limited Liability
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AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A. <u>Officer/Director</u>
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
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OTHER FILINGS	
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<input type="checkbox"/>	Foreign
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<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED  
97 FEB - 7 AM 10:35  
TALLAHASSEE, FLORIDA  
SH 2 1/2

Florida Department of State, Sandra B. Mortham, Secretary of State

OFFICER / DIRECTOR RESIGNATION

I, <sup>Box</sup> Christopher M. Box, hereby resign as PRESIDENT  
(Title)  
of Wood Accents, Inc.  
(Name of Corporation)  
a corporation organized under the laws of the State of Florida.

That the corporation has been notified in writing of the resignation.

x Christopher M. Box

(Signature of resigning officer/director)

SWORN TO BEFORE ME A NOTARY PUBLIC THIS 4th DAY OF FEBRUARY 1997

Elizabeth A. SeEVERS Notary Public



ELIZABETH A. SEEVERS  
Notary Public, State of Ohio  
My Commission Expires July 23, 1998

FILING FEE IS \$35.00

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