PORT SAINT	LUCIE, FL 34984 US			
FEI Number: 46-0730725		Certificate of Status Desired: No		
Name and Ac	dress of Current Registered Agent:			
CRUICKSHANK, 2857 SE EAGLE PORT SAINT LU				
The above named e	entity submits this statement for the purpose of changing its regis	stered office or re	gistered agent, or both, in the State of F	Florida.
	entity submits this statement for the purpose of changing its regis HOMER CRUICKSHANK	stered office or re	gistered agent, or both, in the State of F	Florida. 04/10/2017
		stered office or reg	gistered agent, or both, in the State of F	
SIGNATURE:	HOMER CRUICKSHANK	stered office or reg	gistered agent, or both, in the State of F	04/10/2017
SIGNATURE:	HOMER CRUICKSHANK Electronic Signature of Registered Agent	stered office or reg	gistered agent, or both, in the State of F	04/10/2017
SIGNATURE: Authorized P	HOMER CRUICKSHANK Electronic Signature of Registered Agent Person(s) Detail :			04/10/2017

Current Principal Place of Business: 2857 SE EAGLE DRIVE PORT SAINT LUCIE, FL 34984

DOCUMENT# L12000105440

Entity Name: 'I DO" FLOWERS LLC

Current Mailing Address:

2857 SE EAGLE DRIVE

City-State-Zip: PORT SAINT LUCIE FL 34984

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RHONA CRUICKSHANK

MANAGER

City-State-Zip: PORT SAINT LUCIE FL 34984

04/10/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 10, 2017 **Secretary of State**

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2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT