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Account Name : DAVIS, BROWNING & SCHNITKER, P.A.

Account Number : 119980000057 Phone : (850) 973-4186 : (850)973-8**564**

FLORIDA/FOREIGN LIMITED LIABILITY CO.

ASHLYN'S ROSE PETAL FLORIST, LLC

Certificate of Status	0
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S. HAWKES

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ARTICLES OF ORGANIZATION OF ASHLYN'S ROSE PETAL FLORIST, LLC

The undersigned subscribers to these Articles of Organization, natural persons, competent to contract, hereby executed these Articles for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I.

The name of this limited liability company is ASHLYN'S ROSE PETAL FLORIST, LLC.

ARTICLE II

The period of duration for this limited liability company shall be perpetual.

ARTICLE III.

The mailing address and street address of the principal office of this limited liability company is 224 SW Range Avenue, Madison, Florida 32340.

ARTICLE IV.

The name and street address of the initial registered agent of this limited liability company is Myrtice Tompkins, 224 SW Range Avenue, Madison, Florida 32340.

ARTICLE V.

The only member of this limited liability company is LARRY R. TOMPKINS. The members of this limited liability company may admit additional members to this limited liability company by unanimous vote of the members of this limited liability company.

ARTICLE VI.

The remaining members of this limited liability company shall have the right to continue the business of this limited liability company on the death, retirement, resignation, expulsion,

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bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in this limited liability company.

ARTICLE VII.

This limited liability company shall be a manager managed limited liability company and the manager is MYRTICE TOMPKINS, who shall have the right and authority to manage limited liability company.

ARTICLE VIII.

The organizing member of this limited liability company is LARRY R. TOMPKINS

IN WITNESS WHEREOF, the said member has hereunto set his hand and seal this 1st day of April, 2009.

ASHLYN'S ROSE PETAL FLORIST, LLC

STATE OF FLORIDA COUNTY OF MADISON

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State and County named above to take acknowledgments, personally appeared Larry R. Tompkins, for ASHLYN'S ROSE PETAL FLORIST, LLC, before me known to be the person described as the organizer in, and who executed the foregoing Articles of Organization, and acknowledged before me that hesubscribed to these Articles of Organization.

WITNESS my hand official seal in the County and State named above this 1st day of April, 2009. Juju A Bis

My Commission Expires:

Notary Public, State of Florida My Comm. Expires Feb. 8, 2010 Comm. No. DO 499872

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

In compliance with Section 608.415, Florida Statutes, the following is submitted

ASHLYN'S ROSE PETAL FLORIST, LLC, to organize or qualify under the laws of Florida, with its principal place of business at 224 SW Range Avenue, Madison, Florida 32340, names Myrtice Tompkins, whose address is 224 SW Range Avenue, Madison, Florida 32340, and whose street address is 224 SW Range Avenue, Madison, Florida 32340, as its registered agent to accept service of process within Florida, and for such other purposes as required for registered agents.

ASHLYN'S ROSE PETAL FLORIST, LLC

Myrtice Tompkins, Manager

Dated: April 1, 2009

Having been named to accept service of process for the above named limited liability company, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with, and accept the obligations of registered agent.

Myrtice Tompkins

Registered Agent

Dated: April 1, 2009