# 11 10000002548

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
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(Document Number)		
Certified Copies	_ Certificates	of Status
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TO JUN -8 AMII: 25

J. BRYAN

JUN - 9 2010

**EXAMINER** 

EM POWERING # AMERICA'S # ENTREPRENEURS

enitia corporation p.o. box 495 dexter, mi 48130 是是是是一种,我们是一个人,也是一个人,也是一个人,我们就是不**会的,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,** 

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

May 25, 2010

Re: State of the Art Flowers Shop LLC

Dear Sir or Madam:

Enitia Corporation has been authorized by Guila Smith to file the enclosed Registration for State of the Art Flowers Shop LLC.

If you need any additional information, you can reach us at

1-877-281-6496 (toll free) documents@directincorporation.com

We have enclosed an additional \$5.00 for one "Certificate of Status". For your convenience, I have enclosed a self-addressed envelope.

Thank you,

Ed Stahlin Enitia Corporation FILED

10 JUN -8 AMII: 25

SECRETARY OF STATE

#### **COVER LETTER**

	egistration Section ivision of Corporations		
SUBJECT	;State o	f the Art Flowers LLC	
	Na	me of Limited Liability Company	
Existence,	and check are submitted to register the a	bility Company for Authorization to Transact Business in Florid	a," Certificate of siness in Florida
r lease tetu	m all correspondence concerning this ma	atter to the following:	
		Edward Stahlin	
		Name of Person	-
		Direct Incorporation	
		Firm/Company	<i>-</i>
	123 N. Ashley St., Ste 123		IN-8 AMI
		Address	~ im
			A = 2
Ann Arbor MI 48104 City/State and Zip Code			
		City/State and Zip Code @:r	100
		ents@directincorporation.com	
	E-mail address: (	to be used for future annual report notification)	_
For further	information concerning this matter, plea	ise call:	
	Edward Stahlin	at ( 877 ) 281-6496	
	Name of Person	Area Code & Daytime Telephone Number	_
Di Re P.(	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 Ilahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed	is a check for the following amou	nnt:	
ات	\$130.00 Filing Fee \$130.00 Filing Certificate o		

## WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of State of the Art Flowers LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
Delaware
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
State of the Art Flowers Shop LLC
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: May 25, 2010  Signature(!) of Manager(s and/or Managing Member(s):  Guila Smith

CR2E122 (7/07)

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	State of the Art (Name of Foreign Limited Liability Company; must include	Flowers LLC e "Limited Liability Company," "L.L.C.," or "LLC.")				
	State of the Art Flo					
cor	name unavailable, enter alternate name adopted for the purpose asent of the managers or managing members adopting the altern mpany," "L.L.C," "LLC.")	of transacting business in Florida and attach a copy of the vate name. The alternate name must include "Limited Liability	vrittei ty			
2.	Delaware  Jurisdiction under the law of which foreign limited liability company is organized)  3.	(FEI number, if applicable)				
4.	March 17, 2010 5.	Perpetual  (Duration: Year limited liability company will cease to				
	March 17, 2010 5.  (Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")				
6.						
	(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. t	o determine penalty liability)				
7.	7. 16192 COASTAL HIGHWAY, LEWES, DE 19958					
		AP -	THE REAL PROPERTY.			
	(Street Address of	Principal Office)	m			
8.	If limited liability company is a manager-managed of	ompany, check here	U			
9.	The name and usual business addresses of the management	ging members or managers are as follows:				
	Guila Smith					
	4101 Pinetree Dr. #908, Miami Beach, FL 33140					
the	Attached is an original certificate of existence, no more than 90 da jurisdiction under the law of which it is organized. (A photocopy inslation of the certificate under oath of the translator must be submi	is not acceptable. If the certificate is in a foreign language, a	ords in			
11	. Nature of business or purposes to be conducted or	promoted in Florida:				
	To provide flowers for wed	dding and other events				
	Elfal	<b></b>				
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)						
	Edward Stahlin					
	Typed or printed name of signee					

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	State of the Art Flowers LLC	
If unavailable, t	he alternate to be used in the state of Florida is:	
	State of the Art Flowers Shop LLC	
2. The name an	d the Florida street address of the registered agent and office are:	and the same
	Guila Smith	
	(Name)	- R
	4101 Pinetree Dr. #908, Miami Beach, FL 33140	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	- Fig. 1
	Miami Beach, FL 33140	- 26 - 26
	City/State/Zip	
liability company agent and agree relating to the pr	med as registered agent and to accept service of process for the above so at the place designated in this certificate, I hereby accept the appoint to act in this capacity. I further agree to comply with the provisions of the representation of the complete performance of my duties, and I am familiar with a sy position as registered agent as provided for in Chapter 608, Florida is	ment as registered f all statutes nd accept the

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STATE OF THE ART FLOWERS LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF MAY, A.D. 2010.

4801393 8300 100430062

Jeffrey W. Bullock, Secretary of State TION: 7989108

DATE: 05-12-10

You may verify this certificate online at corp.delawars.gov/authver.shtml