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Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 922-4001

## From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

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00 JUN 19 PM 4:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## FLORIDA PROFIT CORPORATION OR P.A.

P A F FLOWERS IMP.&amp;EXP., INC.

Certificate of Status	0
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ARTICLE OF INCORPORATION

OF

P A F FLOWERS IMP. & EXP., INC.

THE UNDESIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT, HEREBY ADOPT(S).

ARTICLE I NAME

THE NAME OF THE CORPORATION WILL BE: P A F FLOWERS IMP. & EXP., INC.  
THE PRINCIPLE PLACE OF BUSINESS OF THIS CORPORATION WILL BE: THE STATE OF FLORIDA  
AND ALL THE UNITED STATES: 10609 S.W. HAMMOCKS BLVD, APT.# 127  
MIAMI, FL 33196

ARTICLE II NATURE OF BUSINESS

THIS CORPORATION MAY ENAGAGE IN OR TRANSACT ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA OR ANY OTHER STATES, COUNTRY, TERRITORY, OR NATION.

ARTICLE III CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND IT'S VALUE THAT THIS CORPORATION IS AUTORIZED TO HAVE OUTSTANDING AT ANYONE TIME IS: ONE HUNDRED AND FIXTY SHARES OF COMMON STOCK WITH PER VALUE OF THE (\$10.00) DOLLARS PER SHARE ALL OF THE STACK WILL BE PAYABLE IN CASH, REAL OR PERSONAL PROPERTY, OR LABORS, OR SERVICES IN LIEU OF CASH VALUATION OF ANY OF THE ABOVE TO BE FIXED BY THE BOARD OF DIRECTORS OF THIS CORPORATION.

ARTICLE IV TERM OF EXISTENCE

THIS CORPORATION IS TO EXIST PERPETUALLY.

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.325, 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.

1. The name of the corporation:  
P A F FLOWERS IMP. & EXP., INC.

2. The name and address of the registered agent and office is:  
EDUARDO ANDA, 10609 S.W. HAMMOCKS BLVD, APT. # 127

(P.O.BOX NOT ACCEPTABLE)

MIAMI, FL 33196

(CITY/STATE/ZIP)

I Eduardo Anda accept the duties as registered agent for this corporation.

SIGNATURE



PRESIDENT-TREASURER

TITLE

JUNE 15, 2000

DATE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, 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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE



JUNE 15, 2000

DATE

FILED  
JUN 15 2000  
TALLAHASSEE  
STATE OF FLORIDA