

P000000 82339

TRANSMITTAL LETTER

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

EFFECTIVE DATE
20-21-00

FILED
00 AUG 28 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Baskets to Go, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000003375040--7
-08/28/00--01110--011
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: JO ANN Abadie
Name (Printed or typed)

604 Lake Ave.
Address

Altamonte Springs, FL 32701
City, State & Zip

407 332-0343
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

AUG 30 2000

100A3 46418

State of Florida
ARTICLES OF INCORPORATION

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator adopts these Articles of Incorporation for the purpose of forming a for-profit corporation.

1. The name of the Corporation is: Baskets To Go Inc. **EFFECTIVE DATE**
10-21-00

2. The principal place of business and mailing address of this corporation is: 101
Seminole Blvd., Altamonte Springs, FL. 32701

3. The corporation is authorized to issue one class of stock, that being 1000 shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

4. No Director shall be held liable to the corporation or its shareholders for monetary damages due to a breach of fiduciary duty, unless the breach is a result of self-dealing, intentional misconduct, or illegal actions.

5. The effective date of this filing is:

October 21, 2000 at 12 o'clock PM.

6. The name and address of the corporation's initial registered agent is: JoAnn Abadie,
604 Lake Ave., Altamonte Springs, FL., 32701.

Having been named as registered agent and to accept service of process for the above named corporation at the place designated in this document, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent:

JoAnn Abadie

Date: Aug 24, 2000

7. The name and street address of the incorporator of this corporation is: Lisa Abadie,
1101 Seminole Blvd., Altamonte Springs, FL., 32701.

In witness whereof, the undersigned incorporator has executed these Articles of Incorporation on the date below.

Date:

8/24/00

Signature of Incorporator:

Lisa Abadie

00 AUG 28 PM 2:21
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA