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TRANSMITTAL LETTER

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

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-08/28/00--01072--021
*****87.50 *****87.50

SUBJECT: TAMARAC FLORIST, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: NEELOFER Seward
Name (Printed or typed)

9943 NW 2nd Court
Address

Plantation, FL 33324
City, State & Zip

954- 578-0026
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 AUG 28 AM 9:53

FILED

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

F. CHESNEY

AUG 31 2000

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

TAMARAC FLORIST INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6980 W. McNab Road
Tamarac, FL 33321

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL FLORIST

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

NEELOFER SEWARD
9943 NW 2nd Ct
Plantation, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

NEELOFER SEWARD
9943 NW 2nd Ct
Plantation, FL 33324

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Neelofe Seward

Signature/Registered Agent

8-24-00

Date

Neelofe Seward

Signature/Incorporator

8-24-00

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 AUG 28 AM 9:53

FILED