PO1000002481

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

100003519041---1

SUBJECT: ENCHANTED BASKETS INC (Proposed corporate name - must include suffix)									
Pasterit		,							
□ \$70.0 Filing Fe		S of incorporation and a compact of the second seco	Filing Fee, Certified Copy & Certificate						
FROM:	LAURA OVA Name (Printed) 5099 NW Addres CORAL SPRING City, State	84 th ROAD	SECRETARY OF STATE TALLAHASSEE, FLORIDA	01 JAN -2 PH12: 20	다. 				
Daytime Telephone number									

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ENCHANTED BASKETS, INC.

OI JAN -2 PH I2: 20
SECRETARY OF STATE
TALLAHASSEE, I LORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5099 NW 84th ROAD CORAL SPRINGS, FL 33067

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LAURA OVADIA 5099 NW 84 ROAD CORAL SPRINGS, FL 33067

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LAURA OVADIA 5099 NW 84th ROAD CORAL SPRINGS FL 33067

The undersigned incorporator(s) has(have) executed these Articles of incorporation to
1st day of JANUARY, 19 2001.
(An additional article must be added if an effective date is requested.)
Law Doad
Signature
Signature
Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

l. The na	ame of the corporation is ENCHANTED BASKETS, INC.			
2. The na	ame and address of the registered agent and office is:	SEC TALL	01.	
	LAURA OVADIA (NAME)	AHASSE	1 JAN -2	ר וב
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	E, FLORIDA	PM 12: 2	Ċ
	CORAL SPRINGS, FL 33067	DA A	0	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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) 1/1/2001 (DATE)