

P0100000 27069

TRANSMITTAL LETTER

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

500003830505--3
-03/12/01--01076--010
*****70.00 *****70.00

SUBJECT: BLOOMIES 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	\$78.75
Filing Fee	Filing Fee & Certificate

FROM: KYONG KIM
Name(Printed or typed)
420 S.E. 1ST AVENUE
Address
POMPANO BEACH, FL 33060
City, State & Zip
(954) 755-6090
Daytime Telephone number

FILED
01 MAR 12 PM 2:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

Daw 3/15/01
HK

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:

BLOOMIES FLORIST, INC.

ARTICLE II PRINCIPAL OFFICE

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

10627 WILES ROAD
CORAL SPRINGS, FL 33076

ARTICLE III SHARES

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

5000 common shares, par value \$1.00 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KYONG KIM
420 S.E. 1ST AVENUE
POMPANO BEACH, FL 33060

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TALLAHASSEE FLORIDA

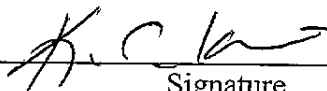
ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

KYONG KIM
420 S.E. 1ST AVENUE
POMPANO BEACH, FL 33060

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 7 day of MARCH, 20 01.
(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

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

FILED
01 MAR 12 PM 2:24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

1. The name of the corporation is: BLOOMIES FLORIST, INC.

2. The name and address of the registered agent and office is:

KYONG KIM
(Name)

420 S.E. 1ST AVENUE
(P.O. Box or Mail Drop Box **NOT** Acceptable)

POMPANO BEACH, FL 33060
(City/State/Zip)

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.

K. C. Kim
(Signature)

3-7-01
(Date)