

# PO1000039986

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)205-0381

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

**FLORIDA PROFIT CORPORATION OR P.A.**

~~BLOOM, INC.~~  
*Bloom International, Inc*

Certificate of Status	0
Certified Copy	1
Page Count	01 (3)
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

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**FLORIDA DEPARTMENT OF STATE**  
Katherine Harris  
Secretary of State

April 19, 2001

FAS-T

SUBJECT: BLOOM, INC.  
REF: W01000008871

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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Neysa Culligan  
Document Specialist  
New Filing Section

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**ARTICLES OF INCORPORATION**  
In compliance with Charter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

**BLOOM INTERNATIONAL, INC.**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

**220 71<sup>st</sup> Street - suite 213, Miami Beach, FL 33141**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To transact any legal business

**ARTICLE IV SHARES**

The number of shares of stock is:

100 shares of \$.1.- par value each

**ARTICLE V INITIAL OFFICERS / DIRECTORS**

The name(s) and address(es):

Jorge Gallego, President\Dir

Allison Masters, Treasurer\Secretary\Dir

220 71<sup>st</sup> Street - suite 213, Miami Beach, FL 33141

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address registered agent are:

*Ugo V. Chiarato*

220 71<sup>st</sup> Street - Suite 213, Miami Beach FL 33141

**ARTICLE VII INCORPORATOR**

The name and address of incorporator are:

Jorge Gallego

220 71<sup>st</sup> Street - Suite 213, Miami Beach FL 33141

\*\*\*\*\*

*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.*

*Ugo V. Chiarato*

Signature /Registered Agent

APRIL 18, 2001  
Date

*Jorge Gallego*

Signature /Incorporator

APRIL 18, 2001  
Date

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