

P01000121816

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 MAR 20 PM 12:39

Requester's Name

BAHIGE M KHARFAN  
8854 NW 187th ST  
MIAMI, FL 33157

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

200005136302--4  
-03/20/02--01037--014  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

*Amend*

V SHEPARD MAR 26 2002

Examiner's Initials

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

B M FLOWER CONNECTION, INC

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(present name)

*Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: *(indicate article number(s) being amended, added or deleted)*

ARTICLE I: PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS  
SHALL BE CHANGED TO:

8854 NW 187th ST  
MIAMI, FL 33157

ARTICLE V: OFFICERS AND DIRECTORS.  
ACCEPT RESIGNATION OF SILVIA M. LOZANO AS  
VICE-PRESIDENT, DIRECTOR AND REGISTERED AGENT.

BAHIGE M. KHARFAN BECOMES NEW REGISTERED AGENT

SILVA KHARFAN BECOMES NEW VICE -PRESIDENT AND  
DIRECTOR. HER ADDRESS:

8854 NW 187th ST  
MIAMI, FL 33157

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

SHARES OWNERSHIP AS FOLLOWS:

BAHIGE M. KHARFAN	50%
SILVA KHARFAN	50%

**THIRD:** The date of each amendment's adoption: 03/11/02.

**FOURTH:** Adoption of Amendment(s) (CHECK ONE)

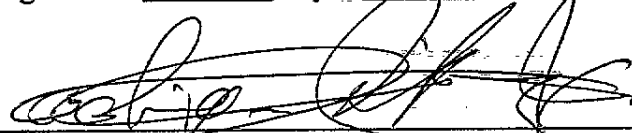
- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_ voting group."

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 11th day of MARCH, 2002.

Signature



(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

BAHIGE M. KHARFAN

\_\_\_\_\_  
Typed or printed name

DIRECTOR

\_\_\_\_\_  
Title

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

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Pursuant to the provisions of Section 607.325, 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:

B M FLOWER CONNECTION, INC

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

BAHIGE M. KHARFAN

(P.O. BOX NOT ACCEPTABLE)

8854 NW 187th ST  
MIAMI, FL 33157

SIGNATURE 

TITLE PRESIDENT

DATE 03/11/02

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE 

DATE 03/11/02