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

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SUBJECT:	CT:					
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)			
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation an	d a check for:		-	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Co & Certificate Status PPY REQUIRE	of		
FROM:	Carolyn	L. Rose (Printed or typed)	tars. No sees things			
-		ashorn Rd.				
•••	Tampa City,	Fl 33624 State & Zip		2002 JAN - 4 AM IO: 17 SEUNCIARY OF STATE TALLAHASSEE FLORIDA		
-		3— 792-1664 elephone number		MIO: 17 F STATE FLORIDA		

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

Ji/8/02

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	2002 JAN -4 AM 10: 17
The name of the corporation shall be:	CEOPETA DV OE OTATE
Silk Creations.biz, Inc.	SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
13521 Staghorn Re, Tampa, Fl 33626	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	of city of the company
Engage in the manufacture and Sale	of silk final arrangements
and other decor items.	
ARTICLE IV SHARES The number of shares of stock is:	
100	
ARTICLE V INITIAL OFFICERS/DIRECTORS (option	<u>al</u> j
The name(s), address(es) and title(s): Carolyn R. Rose, President 13521 Stagkon	n Rel, Tampa Zl 33626
Mark J. Miller, Secretary/Treasurer	13521 Staskorn Rd
	Tampa 72 33626
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
Carolyn R. Rose	
13521 Staghorn Rd. Tamps	L Z1 33626
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Carolyn R. Rose 13521 Stastorn Rd	Tampa 20 33626
*****************	***********
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
tegyphone	1-1-02
Signature/Registered Agent	Date

Signature/Incorporator

/-/-02 Date