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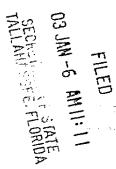
(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	of Status		
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TRANSMITTAL LETTER

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

SUBJECT: Fa	ORAL SUPPLIES AND	S DESIGNS, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and	l a check for:	
\$70.00	□ \$78.75	□ \$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		ADDITIONAL CO	Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	SABORAN I	BRULL DEZ		
110111.	Name (Printed or typed)			
Sog1 SN 88 TELL,				
Address				
Cooper City, Ft 33328 City, State & Zip				
City, State & Zip				
(254) 252-1808				
954) 357-1898 Daytime Telephone number				

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

03 JAN -6 AMII: II

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

FLORA SUPPLIES AND DESIGNS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5091 SW 88 TELEPICE COOPER CITY, FC 33328

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SELL FLORAL ARRANGEMENTS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

DEBORAN BEAMINGS , PRESIDENT 5091 SIN 88 TERRACE CODPER City, EL 33328

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

DEBOLAN AGALUMBER 5091 SW 88 TEARPER COOPER CITY, FC 33328

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the <u>Incorporator</u> is:

DEBORAN BERNUNEZ 5091 SW 88 TERRACE COOPER City, FL 33328

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

Signature/Registered Agent
Signature/Registered Agent
Unbach Banacip 62
Usbach Fermud
Signature/Incorporator

12/2/08 Date

Date