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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

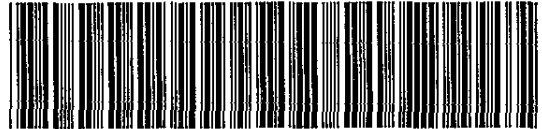
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2003 MAY 23 PM 2:49  
CLERK OF STATE  
TALLAHASSEE FLORIDA

1/2 6/2/03

TRANSMITTAL LETTER

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2003 MAY 23 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

SUBJECT: ROSES ARE FOREVER, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: KRIS SKWIRE  
Name (Printed or typed)

5972 BENT PINE DRIVE, #269  
Address

ORLANDO FL 32822  
City, State & Zip

321-303-1998  
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

## ARTICLE I NAME

The name of the corporation shall be:

Roses Are Forever, Inc.

2003 MAY 23 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5415 LAKE HOWELL RD, #177  
WINTER PARK, FL 32792

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANUFACTURE AND SALES  
OF HANDMADE CRAFTS

## ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

MARIA LAGOUidakis, PRESIDENT  
4419 SEMORAN BLVD. #5, ORLANDO, FL 32822  
KRIS SKWIRE, VICE PRESIDENT/TREASURER  
5972 BENT PINE DRIVE, #269, ORLANDO, FL 32822

## ARTICLE VI REGISTERED AGENT

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

KRIS SKWIRE  
5972 BENT PINE DRIVE, #269  
ORLANDO, FL 32822

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIA LAGOUidakis  
4419 SEMORAN BLVD, #5  
ORLANDO, FL 32822

\*\*\*\*\*  
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

Kris Skwire

Signature/Registered Agent

5/19/03

Date

Maria Lagoudakis

Signature/Incorporator

5/19/03

Date