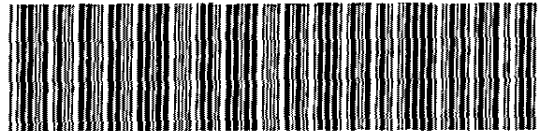


P04000084495

(Requestor's Name)

(Address)

(Address)



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FANTASY OF COLOMBIAN FLOWERS, INC  
8247 PEMBROOK VILLAS CIRCLE  
ORLANDO, FLORIDA 32810-2451

(Business Entity Name)

(Document Number)

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

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**ARTICLES OF INCORPORATION OF  
FANTASY OF COLOMBIAN FLOWERS, INC.**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I NAME**

The Name of the Corporation shall be: FANTASY OF COLOMBIAN FLOWERS, INC.

**ARTICLE II PRINCIPAL PLACE OF BUSINESS**

The principal place of business and mailing address of this corporation shall be:

FANTASY OF COLOMBIAN FLOWERS, INC.  
8247 PEMBROOK VILLAS CIRCLE  
ORLANDO, FLORIDA 32810-2451

**ARTICLE III CAPITAL STOCK**

The number of share of stock that this corporation is authorized to have outstanding at any one time is:

1,000 SHARES OF COMMON STOCK AT ONE DOLLAR (\$1.00) PAR VALUE

ALVIS MUSUMECI 70% of the shares  
ANABELLA LARA 30% of the shares

**ARTICLE IV NATURE OF BUSINESS – FOR PROFIT CORPORATION**

The general nature of the business to be transacted by this Corporation is:

Retail and wholesale of flowers, ceramic baskets, greeting cards, wood craftsmanship, ceramic craftsmanship and other art products related to this line of business.

This Corporation will be engaged in the import of flowers from Colombia and other South American Countries for sales and distribution in the United States of America.

Additionally this Corporation may and is authorized to engage in any activity of business permitted under the Law of the United States and the State of Florida.

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

ALVIS MUSUMECI  
8247 PEMBROOK VILLAS CIRCLE  
ORLANDO, FLORIDA 32810-2451

Phone 407-748-4484

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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#### ARTICLE VI INITIAL BOARD OF DIRECTOR (S)

This corporation shall have two director initially. The number of directors may be either increased or diminished from time to time, but shall never be less than one. The names and addresses of the initial directors of this corporation are:

ALVIS MUSUMECI, PRESIDENT AND TREASURER  
8247 PEMBROOK VILLAS CIRCLE  
ORLANDO, FLORIDA 32810-2451

ANABELLA LARA, SECRETARY  
5218 MILLENIA BLVD APT 202  
ORLANDO, FLORIDA 32839

who shall be the initial directors, president, secretary and treasurer.

#### ARTICLE VII TERMS OF EXISTENCE

This Corporation shall have perpetual existence

#### ARTICLE VIII - INCORPORATORS:

The name and address of the incorporator to these Articles of Incorporation is:

ALVIS MUSUMECI, PRESIDENT AND TREASURER  
8247 PEMBROOK VILLAS CIRCLE  
ORLANDO, FLORIDA 32810-2451

The undersigned incorporator has executed these Articles of Incorporation  
this 25<sup>th</sup> day of MAY, 2004

Alvis Musumeci  
Signature

*Signed before me on the 25<sup>th</sup> day of May, 2004 at  
Orange County, FL. ID Presented: Florida License Number  
H252-001-58-848-0*

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 607.0501 or 617.0501, 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.



*Martha C. Gonzalez*  
Martha C. Gonzalez  
MY COMMISSION # DD209147 EXPIRES  
May 4, 2007  
BONDED THRU TROY FARR INSURANCE, INC.

The name of the corporation is:  
FANTASY OF COLOMBIAN FLOWERS, INC.

The name and address of the registered agent and office is:  
ALVIS MUSUMECI  
8247 PEMBROOK VILLAS CIRCLE  
ORLANDO, FLORIDA 32810-2451

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04 MAY 27 PM 3:18  
TALLAHASSEE, FLORIDA

CELL: 407-748-4484

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.

SIGNATURE Alvis Musumeci

DATE: MAY 25, 2004

*Signed before me on this 25<sup>th</sup> day of May, 2004  
at Orange County, FL. ID presented: Florida  
License Number H252-001-58-848-0*

*Martha C. Gonzalez*



Martha C. Gonzalez  
MY COMMISSION # DD209147 EXPIRES  
May 4, 2007  
BONDED THRU TROY PAUL INSURANCE, INC.