# 405000030982 Florida Department of State

Division of Corporations Public Access System

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To:

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Fax Number : (850)205-0380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3694

Fax Number : (305) 633-9696

# BASIC AMENDMENT

ZEPHYR FLOWERS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75

#### WILLIAM E. AYLSWORTH

15000-D S.W. 49<sup>TH</sup> LANE MIAMI, FLORIDA 33185-4258 E-MAIL: <u>WAYLSWORTH@AOL.COM</u> HOME TELEPHONE (305) 554-0523 FACSIMILE (305) 480-2090 OFFICE TELEPHONE (305) 377-7045

## **FACSIMILE TRANSMISSION**

•	(including cover page):
DATE:	March 14, 2005
TO:	Anna Chesnut
FAX NO:	(850) 205-0380
FROM:	William Any Isworth
RE:	Zephyr flowers, Inc.
1. I hav	e attached the corrected filing, along with
_ your -	Par requesting the correction.
2. If you	can, please dade the submitted Articles of
2. If you Amend	can, please dark the submitted Articles of munt for march 11, 2005, in accordance with
2. If you Amend	can, please dade the submitted Articles of Junear for march 11, 2005, in accordance with givel Liling.
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0 22 0 02	iginal filing.
0 22 0 02	can, please dade the submitted Articles of I want for march 11, 2005, in accordance with ginel Liling.  Kyan for your assistance.
0 22 0 02	iginal filing.
14 PM : 05	iginal filing.
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This beginnite transmission is Confidential and intended only for the person to whom it is addressed. If you are not the intended recipient or, as the intended recipient, you did not receive all the indicated pages, please advise the sender in accordance with mitorination provided above. Thank you.

EMPIRE



Mr. Aylsworth

#### FLORIDA DEPARTMENT OF STATE Glanda E. Hood Secretary of State

March 14, 2005

ZEPHYR PLOWERS, INC. 2000 N.W. 89TH PLACE, SUITE 119 MIAMI, PL 33172

SUBJECT: ZEPHYR FLOWERS, INC.

REF: P05000030982

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent name on file on our data base is Johnson's Pharmaceuticals, LLC. Please make corrections to your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut Document Specialist FAX Aud. #: H05000061750 Letter Number: 705A00017347

RECEIVED

SHAR IL PH 1: 05

SIGN OF CORPORATION

Prepared by:
William E. Aylsworth, Alban, at Law
15000-D S.W. 49th Lana
Miami, FC 33185-425P
(305) 554-0523

Articles of Amendment to Articles of Incorporation of

ZEPHYR FLOWERS, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

# P05000030982

(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

### NEW CORPORATE NAME (if changing):

(Must conta (A profession	ain the v	vord "¢or poration	poration," "company." or "i must contain the word "cha	incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") intered", "professional association," or the abbreviation "P.A.")
				IAN NAME CHANGE) Indicate Article Number(s) or deleted: (BE SPECIFIC)
Ameno	dae	ided	Article VI as	follows:
		;	A 87	CLE VI L DEFICERS
The n	ame	(5) a	_	bress(65) of the initial officers isfare:
Vather	iiel L	. Van	- P	Lil B. Aylsworth - V. S. T
9499	N.E.	10#	Avenue Apt. 102	15000-D S.W. 49+ Lane
tiami <sub>t</sub> .		1		Miami, FL 33185
See as	dded	page	s for amended	registered agent/office) tional pages if necessary)
=			(Attach addit	tional pages if necessary)
f an amer or impler	ndment menting	t provid g the an	ics for exchange, reclas nendment if not contain	ssification, or cancellation of issued shares, provision and in the amendment itself: (if not applicable, indicate N/
				N/A
				(continued)

Sent By: HP LaserJet 3100;

# Amend Initial Registered Agent, Article IV:

#### CERTIFICATE OF DESIGNATION OF

#### REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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 OFFICE. IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: ZEPHYR FLOWERS, INC.

  POS 000030982
- 2. The name and address of the registered agent and office is:

JOHNSON'S Pharmaceuticals, LLC
ATTN: VIVIAN MARTINEZ
72.25 N.W. 25 ST, JUITE 306

Miami, FL 33122

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.

VIVIAN MARTINEZ

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL

The date of each amendment(s) adoption: March //, 2005
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders 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 east 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 2005 Signature Hacia Vangas Vila
(By a director, president or other officer - if directors or officers have not been schooled, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiductary by that fiductary)
MARIA VARGAS VILA (Typed or printed name of person signing)
INCORPORATOR (Title of person signing)
(Title of person signing)

FILING FEE: \$35