

PO6000065973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

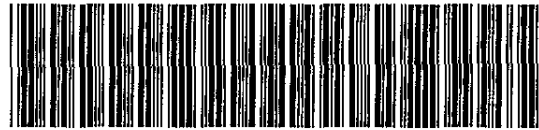
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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1964:246; 1966:2; 1967:224, 225.

5/11/54
5/13/54

COVER LETTER

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

SUBJECT: Miami Flowers 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: Miami Flowers Inc
Name (Printed or typed)

6616 Coral Way
Address

Miami, Florida 33155
City, State & Zip

305-336-1677
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2006

MIAMI FLOWERS INC
6616 CORAL WAY
MIAMI, FL 33155

SUBJECT: MIAMI FLOWERS INC
Ref. Number: W06000020677

We have received your document for MIAMI FLOWERS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of 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) 245-6955.

Suzanne Hawkes
Document Specialist
New Filing Section

Letter Number: 806A00031468

ARTICLES OF INCORPORATION,

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

ARTICLE I NAME

The name of the corporation shall be:

Miami Flowers by Lucia Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6616 Coral Way
Miami, FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Baskets & flower shop for Any & All Lawful business

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Lucia Escobar
6616 Coral Way
Miami, Florida 33155

President - CEO

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Miguel Crego SE
6616 Coral Way
Miami, FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lucia Escobar
6616 Coral Way
Miami, Florida 33014

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

Lucia Escobar
Signature/Incorporator

Date

4/24/06

Date

4-24-06