

PO6000106389

(Requestor's Name)

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(City/State/Zip/Phone #)

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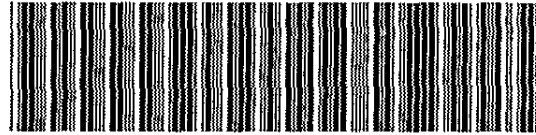
(Business Entity Name)

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2006 AUG 15 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

006-34731

COVER LETTER

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

SUBJECT: Empress flower's & Gift Shop, 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: SONIA JAIKARAN
Name (Printed or typed)
9970 Martinique DR.
Address
Miami FL 33189
City, State & Zip
305-423-5866
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

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August 7, 2006

SONIA JAIKAREN
9970 MARTINIQUE DR
MIAMI, FL 33189

SUBJECT: EMPRESS FLOWERS & GIFT SHOP, INC.
Ref. Number: W06000034731

We have received your document for EMPRESS FLOWERS & GIFT SHOP, 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):

Please label articles. See example of articles attached.

You must list at least one incorporator with a complete business street address.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6855.

Tammy Hampton
Document Specialist
New Filing Section

Letter Number: 706A00049111

*any question please
Call - Sonia
305-423-5866.
Thanks.*

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ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME:

THE NAME OF THE CORPORATION SHALL BE: **EMPRESS FLOWERS & GIFT SHOP, INC.**

ARTICLE II PRINCIPAL OFFICE:

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS: **17610 SW 80CT MIAMI FLORIDA, 33157**

ARTICLE III PURPOSE:

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS:
WHOLESALE & RETAIL FLOWER AND GIFTS ITEM AND ANY OTHER ACTIVITIES THE CORPORATION DEEMS NECESSARY.

ARTICLE IV SHARES:

THE NUMBER OF SHARES OF STOCK IS: **100**

ARTICLE V INITIAL OFFICERS AND / OR DIRECTORS:

NAMES, ADDRESSES AND SPECIFIC TITLES

1. MARLENE RIOBE 17610 SW 80 CT MIAMI FLORIDA, 33157 { DIRECTOR }
2. JESSICA RIOBE 17610 SW 80 CT MIAMI FLORIDA, 33157 { DIRECTOR }
3. CLAUDE RIOBE 17610 SW 80 CT MIAMI FLORIDA, 33157 { DIRECTOR }
4. JASON RIOBE 9970 MARTINIQUE DR MIAMI FL, 33189 { DIRECTOR }
5. SONIA JAIKARAN 9970 MARTINIQUE DR MIAMI FL, 33189 { DIRECTOR }

ARTICLE VI REGISTERED AGENT:

THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS:
MARLENE RIOBE 17610 SW 80 CT MIAMI FLORIDA, 33157

ARTICLE VII INCORPORATOR:

THE NAMES AND ADDRESS OF THE INCORPORATOR IS:
MARLENE RIOBE 17610 SW 80 CT MIAMI FLORIDA, 33189


SIGNATURE/ REGISTERED AGENT

08-11-06
DATE


SIGNATURE/ INCORPORATOR

08-11-06
DATE