

PD9000081749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

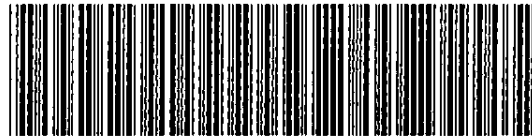
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
10/5

COVER LETTER

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

SUBJECT: FLORA AURA, 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: JOLIE DEMARCO
Name (Printed or typed)

1502 Cormorant Road
Address

Delray Beach FL 33444
City, State & Zip

561-843-9222
Daytime Telephone number

weddingnote@aol.com
E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAME

The name of the corporation shall be:

FLORA AURA INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1502 Cormorant Road, Delray Beach FL 33444

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

wholesale flowers & gift items

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOLIE DEMARCO , president

ARTICLE VI REGISTERED AGENT

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

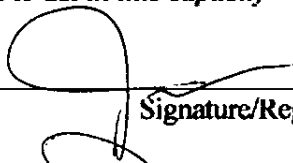
1502 Cormorant Road Delray Beach FL 33444
JOLIE DEMARCO

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOLIE DEMARCO
1502 Cormorant Road Delray Beach FL 33444

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



Signature/Incorporator

FILED

09 OCT -2 PM 12:19

SECRETARY OF STATE
TALLAHASSEE FLORIDA

9/28/09
Date

9/28/09
Date