Florida Department of State Division of Corporations

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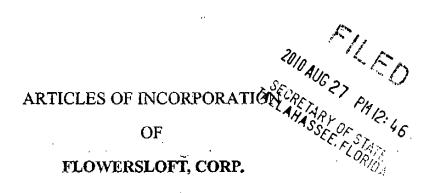
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FLORIDA PROFIT/NON PROFIT CORPORATION FLOWERSLOFT, CORP.

Certificate of Status	0
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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

FLOWERSLOFT, CORP.

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

21387 Marina Cove Cir - Unit F 11 Aventura, Florida 33180

<u>ARTICLE II - NATURE OF BUSINESS</u>

This corporation may engage in Sale and Purchase of Flowers and event productions or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida any other state, country, territory or nation.

ARTICLE III - CAPITAL STOCK

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

1,000 SHARES \$ 1.00 PER VALUE

Prepared by:

Hispan American Services Inc. 1830 NW. 7th St., Suite # 205 Miami, FL 33125

ARTICLE IV - TERMS OF EXISTENCE

This corporation is to exist perpetually.

<u>ARTICLE V – OFFICERS</u>, DIRECTORS

The name(s) and street address (es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected,

Melisa Soued

President

21387 Marina Cove Cir – Unit F-11

Aventura Florida 33180

Patricia Genis

Secretary and Treasury 21200 Point Place # 605

Aventura Florida 33180

<u>ARTICLE VI - INCORPORATOR(S)</u>

The name(s) and address (es) of the incorporator(s) to these articles of incorporation is (are):

Melisa Soued 500 Shares

21387 Marina Cove Cir – Unit F-11

Aventura Florida 33180

Patricia Genis 500 Shares

21200 Point Place # 605 Aventura Florida 33180

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation these 18 days of August, 2010

a	Signature(s) of Incorporator	r(s)
	A RDA	
ν .		

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

1. The name of the corporation
FLOWERSLOFT, CORP.
2. The name and address of the registered agent and office is:
Melisn Soued EXT 2
(P.O. BOX NOT ACCEPTABLE)
2. The name and address of the registered agent and office is: Melisa Soued (P.O. BOX NOT ACCEPTABLE) 21387 Marina Cove Cir – Unit F 11 – Aventura Florida 33180 (ADDRESS OFFICE)
(ADDRESS OFFICE)
SIGNATURE x
TITLE President
DATE 08/18/2010
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE X

08/18/2010

DATE