

Division of Corporations

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P1200195449

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 SEP -6 AM 8:50

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
BLOOMING AMERICA, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$43.75

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S. YOUNG

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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8/16/2017 9:44:50 AM PAGE 1/001 Fax Server



August 16, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BLOOMING AMERICA, INC.
11360 NW 22 STREET
PLANTATION, FL 33323

SUBJECT: BLOOMING AMERICA, INC.
REF: P12000095449

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 must sign accepting the designation.

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) 245-6050.

Shelia H Young
Regulatory Specialist II

FAX Aud. #: H17000216537
Letter Number: 417A00016754

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BLOOMING AMERICA, INC.

DOCUMENT NUMBER: P12000095449

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cheyenne Moseley

Name of Contact Person

LegalZoom.com, Inc.

Firm/ Company

101 N. Brand Blvd., 11th Floor

Address

Glendale, CA 91203

City/ State and Zip Code

fachreim@gmail.com

Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley

Name of Contact Person

at (800) 773-0888 ext. 9724

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of
BLOOMING AMERICA, INC.

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

P12000095449

(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:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent United States Corporation Agents, Inc.

13302 Winding Oak Court, Suite A

(Florida street address)

New Registered Office Address: Tampa, Florida 33612

(City)

(Zip Code)

New Registered Agent's Signature, If changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

CW

Cheyenne Moseley, assistant secretary on
behalf of United States Corporation Agents, Inc.

Signature of New Registered Agent, if changing

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17 SEP -6 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	P	MOHAMED ELAREF	11360 NW 22 STREET
<input type="checkbox"/> Add			PLANTATION, FL 33323
<input checked="" type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	VD	FADI CHREIM	11360 NW 22 STREET
<input type="checkbox"/> Add			PLANTATION, FL 33323
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	S	COKAB ELAREF	11360 NW 22 STREET
<input checked="" type="checkbox"/> Add			PLANTATION, FL 33323
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	T	AMER ELAREF	11360 NW 22 STREET
<input checked="" type="checkbox"/> Add			PLANTATION, FL 33323
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	PD	BASMA ELAREF	11360 NW 22 STREET
<input checked="" type="checkbox"/> Add			PLANTATION, FL 33323
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

The date of each amendment(s) adoption: 8/3/2017 if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted 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 cast 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.

Dated 08/12/2017

Signature R. A. BASMA
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

BASMA ELAREF

(Typed or printed name of person signing)

President

(Title of person signing)