

P13000003167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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12/12/12--01013--011 \*\*78.75

13 JAN -2 PM 4:52

RECEIVED  
DIVISION OF CORPORATIONS  
SECRETARY OF STATE

W12000061743

1/9/13

COVER LETTER

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

Ref# W12000061743

SUBJECT: Gift Basket Market, 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: Oksana Henn {Gift Basket Market, Inc}

Name (Printed or typed)

9820 Creekfront Rd # 503

Address

Jacksonville, FL 32256

City, State & Zip

720-366-2540

Daytime Telephone number

roxy32256@gmail.com

E-mail address: (to be used for future annual report notification)

\* Effective date: January 1, 2013

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

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RECEIVED  
DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

2013 JAN -2 PM 4: 52

RECEIVED

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 13, 2012

OKSANA HENN  
9820 CREEKFRONT ROAD #503  
JACKSONVILLE, FL 32256

SUBJECT: GIFTS BASKET BARKET, INC  
Ref. Number: W12000061743

We have received your document for GIFTS BASKET BARKET, 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):

You may file using only one (1) registered agent and only one (1) needs to sign.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected 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) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 312A00029501

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 JAN -2 PM 4: 52

EFFECTIVE DATE 01/01/13

**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: **Gift Basket Market, Inc**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

9820 Creekfront Rd # 503

Jacksonville, FL 32256

Mailing address, if different is:

same

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

to offer a variety of gift baskets to the public at a very reasonable price.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

*\* Effective date: January 1<sup>st</sup>, 2013*

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Oksana Henn, Owner

Address: 9820 Creekfront Rd # 503

Jacksonville, FL 32256

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Viatcheslav (Pavel) Korolev, co-owner

Address: same as above

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Oksana Henn

Address: 9820 Creekfront Rd # 503

Jacksonville, FL 32256

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Oksana Henn

Address: 9820 Creekfront Rd # 503


Jacksonville, FL 32256

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

 O. Henn  
Required Signature/Registered Agent

12-28-2012  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 O. Henn  
Required Signature/Incorporator

12-28-2012  
Date