## P13000005258

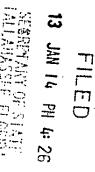
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Special Instructions to	Filing Officer:		
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Office Use Only



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## **COVER LETTER**

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

SUBJECT:	Mianu.	tloral (	01P.	
	(PROPOSED CORPORA	'E NAME – <u>MUST INCLI</u>	UDE SUFPIX)	
Enclosed are an or	iginal and one (1) copy of the artic	cles of incorporation and	d a check for:	
\$70.00 Filing Fee	Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED	
FROM: _	Alexis	(Printed or typed)	e <u>Z</u>	
_	716 N	W 129 ddress	4	
_	Mia mi	FL 3.	3182	
786-1	489-2038 OC	0-000-	0800	,
· <u> </u>	E-mail address: (to be used	elephone number  Flor luture appular report	om (2) Ho	stmail.com
	Miami	Floral	Farmo	) Hot mail

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 l	pe: // (1d	m +6	le	Corp.	
ARTICLE II PRINCIPAL Principal	OFFICE street address	ľ	Mailing address,	if different is:	
7/6 XW Mami	129 PC FL 331	82 7	6 NW Yeary	129 P( F( 3	318
ARTICLE III PURPOSE The purpose for which the corpora	ation is organized is:	Whole	esule	7 loa	ncs
				> <b>3</b>	
ARTICLE IV SHARES The number of shares of stock is:_	100				FILED
Name and Title:  Address	exis Mari exis Mari 1631 W 12	Name and Title		# 26	
Name and Time.	6 HW 129 P	Name and Title Address:			
<del></del>		<del></del>			

Name and Title:	Name and Title:_	FILED
Address	Address:	SEGRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT at Address:  Address:  76 / W 16	cceptable) of the registered ager  YPUCE  Z9PL  33/82	nt is:
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is:  Name:  Address:  Address:  The name and address of the Incorporator is:  Alex15  Miani Fl	019002 29 Place 33/22	
Having been named as registered agent to accept service this certificate, I am familiar with and accept the appoint	umentles registered agent and d	ed corporation at the place designated in agree to act in this capacity
Required Signature/Registered  I submit this document and affirm that free facts stated document to the Department of State constitutes a third  Required Signature/Incorpo	perhia are true. I am aware to degree felony as provided for in	that the false information submitted in a s.817.155, F.S.