

P13000041489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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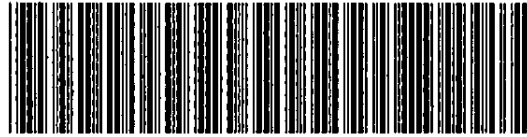
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRB
5/9/13

COVER LETTER

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

SUBJECT: **EXOTIC BLOOMS FLORAL & EVENTS 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: **MARIE L. ISIDORE**
Name (Printed or typed)
2104B North Federal Highway
Address
Hollywood, FL 33020
City, State & Zip
954-604-8113
Daytime Telephone number
exoticblossfloralevents@yahoo.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: EXOTIC BLOOMS FLORAL & EVENTS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2104B North Federal Highway

Hollywood, FL 33020

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation may engage in or transact any or all lawful activity or business
permitted under the laws of the United States, the State of Florida, or any other
state, country.

ARTICLE IV SHARES

The number of shares of stock is: 5

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marie L. Isidore, President

Name and Title: _____

Address 2104B North Federal Highway
Hollywood, FL 33020

Address: _____

Name and Title: Jean F. Lafleur, General Manager

Name and Title: _____

Address 2104B North Federal Highway
Hollywood, FL 33020

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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(cont.)

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

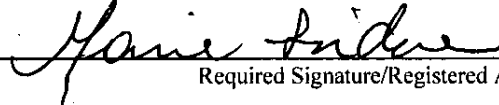
Name: Marie L. Isidore
Address: 2104B North Federal Highway
Hollywood, FL 33020

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Name: Jean F. Lafleur
Address: 2104B North Federal Highway
Hollywood, FL 33020

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


Required Signature/Registered Agent

05-02-13
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.


Required Signature/Incorporator

05-02-13
Date