

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : VALDES ACCOUNTING AND TAXES, INC.
Account Number : I20120000066
Phone : (305) 227-2727
Fax Number : (305) 397-2675

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

Email Address: valdesaccounting@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION
BLOOMING ORCHIDS DESIGNS INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

BLOOMING ORCHIDS DESIGNS INC

ARTICLE II PRINCIPAL OFFICE

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

**9818 SW 77TH AVE
MIAMI, FL 33156-2619**

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**IRENE SOTOLONGO
9818 SW 77TH AVE
MIAMI, FL 33156-2619**

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ARTICLE V INCORPORATORS(S)

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

**IRENE SOTOLONGO
9818 SW 77TH AVE
MIAMI, FL 33156-2619**

ARTICLE VI DIRECTOR(S)

The name (s) and street address(es) of the director(s) to these Articles Of Incorporation is (are):

**IRENE SOTOLONGO
9818 SW 77TH AVE
MIAMI, FL 33156-2619**

DIRECTOR

**JUANA A. LEAL COHEN
9818 SW 77TH AVE
MIAMI, FL 33156-2619**

DIRECTOR

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this December 19, 2013



SIGNATURE

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the corporation is:

BLOOMING ORCHIDS DESIGNS INC

1. The name and address of the registered agent and office is:

**IRENE SOTOLONGO
9818 SW 77TH AVE
MIAMI, FL 33156-2619**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN HIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



DATE

December 19, 2013

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