P1900003133

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
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(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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K. PACE MAR 2 6 2019



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COVER LETTER

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

SUBJECT: Certificate of Domestication & Articles

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication \$ 50.00 Articles of Incorporation and Certified Copy \$ 78.75 Total to domesticate and file \$128.75

OPTIONAL:

Certificate of Status

\$ 8.75

Bliss Candies, Inc.

Name (printed or typed)

5002 SW 20th PL

Address

Cape Coral, FL 33914

City, State & Zip

612-221-7568

Daytime Telephone Number

info@kawaiitreatsandeats.com

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

F18-5057

CERTIFICATE OF DOMESTICATION

The undersigned, Patrick Duckson	on COO	•			_
	Name)	(Title)			
of Bliss Candies, Inc.		a fore	eign corr	oratic	on.
(Corporation in accordance with s. 607.1801, Flor					
1. The date on which corporation w	vas first formed was May 4		, 20	12	
2. The jurisdiction where the above came into being was Minneso	-	med, incorporat	ed, or of	therwi	se
 The name of the corporation important was Bliss Candies, Inc. 	nediately prior to the filing of thi	s Certificate of	Domest	ication	1
4. The name of the corporation, as s. 607.0202 and 607.0401 with the	set forth in its articles of incorporation in its articles of incorporation is Bliss Candies		ed pursu	ant to	-
	the seat, siege social, or principa n, or any other equivalent jurisdic the Certificate of Domestication	tion under appl			·
 Attached are Florida articles of i to s. 607.1801. Patrick Duckson , of Bliss 		nestication requ	irement	s purs	uant
1 am, 01	o carraios, irio.				
and am authorized to sign this Certif so this the 13 day of March	icate of Domestication on behalf	of the corporat	ion and 2019	have o	done
- Fat	LESC.	_		19	: ::[,
	(Authorized Signature)			HAS 18	
Certificate of D		\$ 50.00		## 9:35	
Articles of Inco Total to domest	rporation and Certified Copy ticate and file	\$ 78.75 \$128.75	7-61	5	<u>5</u> -1

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME			
THE NAME OF THE CORPORATION SHALL BE:			
Bliss Candies, Inc.			
ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:			
Principal Address	Mailing Address		
5002 SW 20th PL	1616 W CAPE CORAL PKWY		
Cape Coral, FL 33914	STE 102 PMB 124 Cape Coral, FL 33914		
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZ.	ED:		
Any and all lawful business.			
	in the second		
			
	9. 35 04. 35 04. 35		
	19 9 35 C		
	- 3/ 3		

ARTICLE IV SHARES THE NUMBER OF SHARES OF STOCK IS: 1000	0000	
ARTICLE V INITIAL DIRECTORS A THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TO	· · · · · · · · · · · · · · · · ·	
Title/Name	Title/Name	
CEO, Soury Duckson	COO, Patrick Duckson	
5002 SW 20th PL	5002 SW 20th PL	
Cape Coral, FL 33914	Cape Coral, FL 33914	
Title/Name	Title/Name	
Title/Name	Title/Name	
	R 18	
	72	
	9: 35 102:	
Title/Name	Title/Name	

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCE	
Patrick Duckson	
5002 SW 20th PL	
Cape Coral, FL 33914	
ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS:	
Soury Duckson	
5002 SW 20th PL	
Cape Coral, FL 33914	
***************	********
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCE. STATED CORPORATION AT THE PLACE DESIGNATED IN THIS	
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGE	
Letter -	3/13/2019
Signature/Registered Agent	Date
Muy ?	3/13/2019
Signature/Incorporator	Date