

P21 000094580

Florida Department of State

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

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800)221-2972
Fax Number : (917)243-5843

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

Blooming Things Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

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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: Blooming Things Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

23-18 Arcadia Road

Fair Lawn, New Jersey 07410

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: 50,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Raysean Graham, Director

Name and Title: _____

Address: 23-18 Arcadia Road

Address: _____

Fair Lawn, NJ 07410

Name and Title: _____ Name and Title: _____

Address: Ray Graham, Director

Address: _____

93 Rina Drive Newlands

Grand Cayman, Cayman Islands

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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CLERK OF DISTRICT COURT
JUDICIAL DISTRICT NO. 1
MIAMI, FL

Name and Title. _____	Name and Title. _____
Address _____	Address. _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.

Address: 155 Office Plaza Drive, 1st Fl.

TALLAHASSEE, FL 32301

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: STEPHAN MONEREAU

Address: 100 WALL STREET, STE 503

NEW YORK, NY 10005

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing. _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.*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

11/01/2021

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

11/01/2021

Date

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