P95000005124 ORIGINAL

Department of State
Division of Corporations
P.O. Box 6327

Taliahassee, FL 32314

SUBJECT: FREGAL FLOWERS GIFTS / NC

(Proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for

\$ 100 C Copy of the articles of incorporation and a check for

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Note: Please provide the original and one copy of the articles.

BE 1/20

ARTICLES OF INCORPORATION

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OF

FRUGAL FLOWERS + GIFTS, LUC

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 | NAME

The name of the corporation shall be:

FRUGAL FLOWERS + GIFTS, /NC.

ARTICLE II PRINCIPAL OFFICE

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

1330 COLLINS AUE. #1 MIAMI BEH, FL. 33/39

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOSE ESCANDELL 1330 COLLINS AVE #1 MIAMI BUH, FL. 33139

ARTICLE V

The name(s) and tion is(are):	street address(es) (of the incorporator		
	JOSE KSCANT 1330 COMM	WI Page	DRIGINAL IN	or accupara-
•	1330 COLLIN	15 Aug -41	JECTY-(RE	AS, DIRECTOR
	Man R.	F == 100		
	Miami Bett	,76, 33139		

The undersigned incorporator(s) has(have) executed these Articles of Incorporation th
17
day of, 19_95
\wedge
Jose Escandell
Signature
Signature
Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF 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.

i.	The name of the corporation is: TRUGAL TROWNER GIFTS, We.
2.	The name and address of the registered agent and office is:
	(Name) O
	(P.O. Box NOI acceptable)
•	Musical Brill, F1. 33139 (City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this 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

REGISTERED AGENT FILING FEE: \$35.00