3/15/95

FLORIDA DIVISION OF CORPORATIONS

8:52 AM

(((H95000002947)))

TO: DIVISION OF CORPORATIONS

DEPARTMENT OF STATE

STATE OF FLORIDA

409 EAST GAINES STREET

TALLAHASSEE, FL 32399

FAX: (904) 922-4000

PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

FROM: FAS-T CORP. AGENTS, INC.

8405 NH 53RD ST

SUITE C-100

MIAMI FL 33166-302-

CONTACT: LIDIA FERNANDEZ

PHONE: (305) 599-0839

FAX: (305) 592-9591

(((H950000002947))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: REGE FLOWERS, INC.

FAX AUDIT NUMBER: H93000082947

DATE REQUESTED: 03/15/1995 CERTIFIED COPIES: 0

NUMBER OF PAGES: 3

CURRENT STATUS! REQUESTED TIME REQUESTED: 08:52:01

CERTIFICATE OF STATUS: 1

METHOD OF DELIVERY: FAX

ESTIMATED CHARGE: \$78.75 ACCOUNT NUMBER: 071001002335 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.

(((H95000002947)))

** ENTER 'M' FOR MENU. **

3/15/95

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM

8:52 AM

67:11... 1 ...

03/15/95 11:55 FAS-T CORPORATE AGENTS

(305) 592-9591

P. 002

H95000002947

ARTICLES OF INCORPORATION

QĒ

RECE FLOWERS, INC.

PILED
95 MAR 15 PHIZ: 08
SECRETARY OF STATE
TALLAHASSEF FI COMMA

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

ARTICLE ! NAME

The name of the corporation shall be:

RECE FLOWERS, INC.

The principal place of business of this corporation shall be:

2250 N.W. 14th St. # 5

Miami, Fl 33125

ARTICLE & NATURE OF BUSINESS

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

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 1,000 Shares \$ 1.00 par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

'the name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Szabo Laszlo

2250 N.W. 14th St. # 5 Miami, FL 33125

Alberto Perez

2918 N.W. 25th Ave. Miemi, FL 33125

Prepared by: Szabo Laszlo

2250 N.W. 14th St. # 5

Miami, FL 33125 (305) 477-2994

EDECODO - -

H95000002947

P. 003

H25000002947

ARTICLE VI MCORPORATOR(A)

| The name(s) and street address(4 | es) of the incorporator(s) to this articles of incorpora- |
|----------------------------------|---|
| tion is(are): | • |

Szabo Laszlo 2250 N.W. 14th St. # 5 Miami, FL 33125

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of incorporation this ______19_95

| Signature(s) of Incorporator(s) | |
|---------------------------------|--|
| | |
| | |

H95000002947

H95000002947

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 807.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, aubmits the following statement in designating the registered office/registered agent, in the State of Florida.

| 2. The name and address of the registered agent and office is: Szabo Laszlo | 1. | The name of the corporation is: RECE FLOWERS, INC. | | |
|--|-----|--|-------------|---------------|
| (P.O. BOX NOT ACCEPTABLE) 2250 N.W. 14th St. # 5 Miami, FL 33125 (CITY/STATE/ZIP) SIGNATURE (CORPORATION AT THE PLACE DESIGNATED WITHING CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. | 2. | The name and address of the registered agent and office is: | A7 | ` |
| (CITY/STATE/ZIP) SIGNATURE CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HERBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. | | Szabo Laszlo | <u> </u> | |
| COTPORTION AT THE PLACE DESIGNATED IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. | | (P.O. BOX NOT ACCEPTABLE) | 玉三 | · 55 . |
| SIGNATURE SIGNATURE (COPPERING OFFICER) TITLE DITECTOT DATE 3/14/95 HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE SIGNATURE | | 2250 N.W. 14th St. # 5 Miami, FL 33125 | ARY SSEE | |
| SIGNATURE (CORPORATION OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 807.325, FLORIDA STATUTES. | | | THE | 五.[|
| SIGNATURE (CORPORATION OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 807.325, FLORIDA STATUTES. | | | SE. | ?: O |
| TITLE Director DATE 3/14/95 HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE | | | Ďľ. | පා |
| TITLE Director DATE 3/14/95 HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE | | | | |
| HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. | | (dorpérate officer) | | |
| HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. | | TITLE Director | | |
| CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE | | DATE 3/14/95 | | |
| TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE | | | | |
| CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE | | | | |
| PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PER- FORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SEC- TION 607.325, FLORIDA STATUTES. SIGNATURE | w | MINORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE THE | DEDV A | Oper |
| FORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE | " | JACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMBIN | | THE |
| SIGNATURE | ГN | WAISIONS OF ALL STATUTES HELATIVE TO THE PROPER AND COM | IDI ETE | DCD |
| | TIC | ON 607.325, FLORIDA STATUTES. | MS OF | SEC- |
| | | 011 10 | 01 | |
| DATE 3/14/95 | | SIGNATURE V | <u> </u> | |
| | | DATE 3/14/95 | | |

REGISTERED AGENT FILING FEE: .

H95000002947