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FLORIDA DIVISION OF CORPORATIONS

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LETTER FROM THE COVER SHEET

TO: DIVISION OF CORPORATIONS

FROM: CONTINENTAL STAMP & SEAL

DEPARTMENT OF STATE

8744 SW 133RD ST

STATE OF FLORIDA

409 EAST GAINES STREET

MIAMI FL 33176-5929-

TALLAHASSEE, FL 32399

CONTACT: JENNIFER ASNSCH

FAX: (904) 922-4000

PHONE: (305) 232-2226

FAX: (305) 238-6422

((H9500006856))

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: PISTILS N' PETALS INC.

FAX AUDIT NUMBER: H9500006856

CURRENT ((BUS: REQUESTED

DATE REQUESTED: 06/20/1995

TIME REQUESTED: 13147106

CERTIFIED COPIES: 0

CERTIFICATE OF STATUS: 1

NUMBER OF PAGES: 4

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE

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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:

Pistils N' Petals Inc.

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TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

10829 SW 118th
Miami Fla, 33186

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARJORIE L. CORRIGAN
10829 SW 118th
Miami Fla, 33186

H95000006856 JENNIFER BENSCH
CONTINENTAL STAMP & SEAL
8744 S.W. 133 STREET
MIAMI, FL 33176-5929
(305) 232-2226

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ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

MARJORIE L. CORRIGAN
10829 SW 118th
Miami Fla, 33186

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

19 day of JUNE, 19 95.


Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

1. The name of the corporation is: Pistils N' Petals Inc.

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

MARJORIE L. CORRIGAN
(NAME)

10829 SW 118 CT
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Miami FL 33186
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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.

Marjorie L. Corrigan
(SIGNATURE)

6-19-95
(DATE)

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DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314