P960GRANSIMITTALLETTERS 2

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

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SUBJECT: CLAUDIA'S GIFTS FLOWERS INC.	
(Proposed corporate name - must include sulfix)	1
	T.
FROM: MARIA A. GOMEZ Name (printed or typed) 8410 WEST FLAGLER ST, SUITE 208-B	
Address	
MIAMI, FL 33144	
City, State & Zip	
(305) 554-7724	

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

ARTICLES OF INCORPORATION

The understanced incorporator(s), for the purpose of forming a corporation under the Fibrial Justiness 11 9:4.

ARTICLET NAME

The name of the corporation shall be:

CLAUDIA'S GIFTS FLOWERS INC.

ARTICLEIL PRINCIPAL OFFICE

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

2694 S.W. 87th Avenue Miami, Florida 33165

ARTICLE III SHARES

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

100 SHARES COMMON STOCK, NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

MARIA A. GOMEZ 8410 West Flagler St. Suite 208-B Miami, FL 33144

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):

I) MARTA A. GOMEZ	8410 WEST FLAGLER ST
PRESTDENT AND TREASURER	SUTTE 208-B
95% OWNER OF THE CORPORATION'S	MIAMI, FL 33144
SHARES	
2) NORMA BOJORGE	8410 WEST FLAGLER ST
SECRETARY	SUTTE 208-B
5% OWNER OF THE CORPORATION'S	MIAMI, FL 33144
SHARES	
	•
The undersigned incorporator(s) has(have) executed t	these Articles of Incorporation this
14 day of JUNE , 19	
× Main Some	-
MARIA A. GOMEZ Signatur	6)
Signatur	e
Signatur	e

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

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: CLAUDIA'S GIFTS FLOWERS I	NC.		::::::::::::::::::::::::::::::::::::::
2.	The name and address of the registered agent and office is:	111VI	٠ ان ان	111
	MARIA A. GOMEZ (NAME)	HASSE	::120	द्धाप्रस्का इत्युख्या ह
	8410 WEST FLAGLER ST SUITE 208-B	SSEE, FL	:: ::	1 10 1
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	ORIDA	::- [:]	HISP.
	MIAMI, FL 33144	À		
	(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.

MARIA A. GOMEZ (SIGNATURE) (DATE) JUNE 14, 1996