

# CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

NAME \_\_\_\_\_

FIRM \_\_\_\_\_

ADDRESS \_\_\_\_\_

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Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

RE: Everbloom, Inc.

	CASE	DISBURSED
Capital Express		
Art. of Inc. File		
Corp. Record Search		
Partnership File		
Foreign Corp. File		
✓ (1) Copy (s) photo		
Art. of Amend. File		
Dissolution/Withdrawal		
C U S -		
Fictitious Name File	200002156022	0
Name Reservation	04/28/97 01003 030	
Annual Report/Reinstatement	*****70.00	*****70.00
Reg. Agent Service		
Document Filing		
Corporate Kit		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC 1 or 3 File		
UCC 11 Search		
UCC 11 Retrieval		
File No.'s, Copies		
Courier Service		
Shipping/Handling		
Phone ( )		
Top Priority		
Express Mail Prep.		
FAX ( ) pgs.		

SUBTOTALS \_\_\_\_\_

97 APR 28 11:10 55  
RECEIVED  
TALLAHASSEE, FL 32301

FILED

REQUEST TAKEN CONFIRMED APPROVED

DATE 4-28-97

TIME 9:10

BY L3

CK No. \_\_\_\_\_

WALK IN  
Will Pick Up \_\_\_\_\_

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment  
TERMS: NET 10 DAYS FROM INVOICE DATE  
1 1/2% per month on Past Due Amounts  
Past 30 Days, 18% per Annum.

97 APR 28 11:56  
RECEIVED  
TALLAHASSEE, FL 32301

THANK YOU  
from  
Your Capital Connection

**ARTICLES OF INCORPORATION**  
**OF**  
**EVERBLOOM, INC.**

**FILED**  
97 APR 28 AM 10:55  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I: NAME**

The name of the corporation is **EVERBLOOM, INC.**

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business and mailing address of the corporation is Post Office Box 133, Seville, FL 32190-0133.

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

#### **ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is Glenn D. Storch, Esquire, Storch, Hansen & Morris, P.A., 1620 S. Clyde Morris Blvd., Ste 300, Daytona Beach, FL 32119.

#### **ARTICLE V: INCORPORATOR**

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### **ARTICLE VI: INITIAL BOARD OF DIRECTORS**

The name and address of each member of the initial Board of Directors of the corporation is

President, Raymond N. Wilson, Post Office Box 133, Seville, FL 32190-0133.

Vice President, Albert Bennett, Post Office Box 1040, DeLeon Springs, FL 32130.

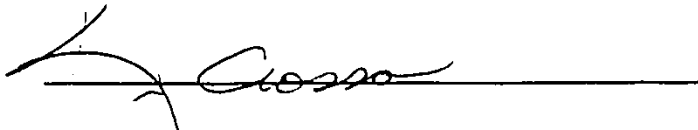
Secretary/Treasurer, Dawn Wilson, Post Office Box 133, Seville, FL 32190-0133.

#### **ARTICLE VII: SPECIAL PROVISION**

It is the intent of the incorporator and directors that the corporation qualify under Section 1244 of the Internal Revenue Code and that the corporation file as a Sub S Corporation. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

The undersigned has executed these Articles of Incorporation this 28th day of April 1997.

"Capital Connection, Inc. by Kim Crosson, Office Manager"

A handwritten signature in dark ink, appearing to read "Kim Crosson", is written over a horizontal line.

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the corporation is:

**EVERBLOOM, INC.**

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

**Glenn D. Storch, Esquire  
Storch, Hansen & Morris, P.A.  
1620 S. Clyde Morris Blvd., Ste. 300  
Daytona Beach, FL 32119**

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.

  
\_\_\_\_\_  
GLENN D. STORCH, Esquire

97 APR 28 AH10:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED