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

Proposed corporate name - must include suffix)

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

\$70.00 Filing Fee

\$78.75 Filing Fee

& Certificate

\$122.50

Filing Fee

& Certified Copy

\$131.25

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

4300 NW 23 TH AVE. SUITE POBOX 147050

GAINESVILLE Fl 32614-7050 City, State & ZiD

(352) 373 - 2015

Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

SECRETARY OF STATE	98 JUL 24 AM 9: 04	
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ARTICLE	Ī.	NAME

The name of the corporation shall be:

ANOTHER FLOWER Shop, INC.

ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of	of this corporation shall be:
4104 NW 1747 AVE.	7 4300 NW 23RY AVE. SUITE 53
GAINESVILLE FL 32605	- PO BOX 147050
ARTICLE III SHARES	GAINESVILLE FL 32614-7050
The number of shares of stock that this corporation is	s authorized to have outstanding at any one time is:
100,000 shares	are authorijed

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ETEC M. PUCH 4104 NW 17 H/ AVE.

CAINESVIILE FL 32605

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

EFIC M. PUGH 4104 NW 17th/ AVE. GAINESVILLE FL. 32605

(An additional article must be added if an effective date is requested.)

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