

P99000013533

TRANSMITTAL LETTER

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

600002770196--4
-02/09/99--01104--006
*****87.50 *****87.50

SUBJECT: FlowerNation.com, Inc.

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

 \$70.00 \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<u> </u> \$78.75	<input checked="" type="checkbox"/> \$87.50
Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Hogan E. Copeland, II
40 Phillips Avenue
Ponte Vedra Beach, FL 32082
(904) 285-8763

FILED
99 FEB -9 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTER FEB 11 1999
1099-3460

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.

ARTICLE I - NAME

The name of the corporation shall be:

FlowerNation.com, Inc.

ARTICLE II - PRINCIPAL OFFICE

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

FlowerNation.com, Inc.
40 Phillips Avenue
Ponte Vedra Beach, FL 32082

ARTICLE III - SHARES

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

One Hundred (100)

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

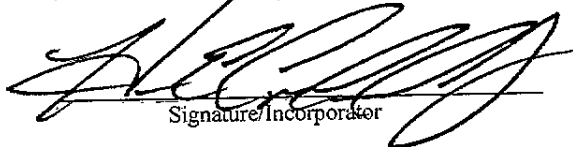
The name and Florida street address of the initial registered agent are:

Hogan E. Copeland, II
40 Phillips Avenue
Ponte Vedra Beach, FL 32082

ARTICLE V - INCORPORATOR

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

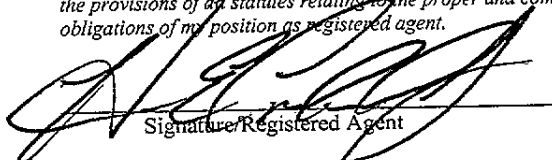
Hogan E. Copeland, II
40 Phillips Avenue
Ponte Vedra Beach, FL 32082


Signature/Incorporator

FEB 8, 1999
Date

(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

FEB 8, 1999
Date

FILED
99 FEB -9 AM 11:14
TALLAHASSEE, FLORIDA
SECRETARY OF STATE