

TRANSMITTAL LETTER

P99000028498

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

SUBJECT: _____

Petals Decor, Inc.

(Proposed corporate name - must include suffix)

300002816753--2

-03/24/99--01054--004

*****70.00 *****70.00

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

FROM: _____

John Mustate

Name (printed or typed)

c/o TAXES & FINANCES, INC

Address

1857 NO. PINE ISL. ROAD

City, State & Zip

PLANTATION, FL. 33320

Daytime Telephone number

954-370-7951

FILED
99 MAR 24 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

B. BROCK MAR 29 1999

ARTICLES OF INCORPORATION

of
PETALS DECOR, INC.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

PETALS DECOR, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue ONE THOUSAND shares (1,000) of ONE DOLLAR Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>PETALS DECOR, INC.</u>		
ADDRESS	<u>15846 NW 11 ST.</u>		
CITY	<u>PEMBROKE PINES</u>	FLORIDA	<u>33028</u> ZIP

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	<u>CHRISTINE KOKKINAS</u>		
ADDRESS	<u>15846 NW 11 ST.</u>		
CITY	<u>PEMBROKE PINES</u>	FLORIDA	<u>33028</u> ZIP

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO () directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>CHRISTINE KOKKINAS</u>		
ADDRESS	<u>15846 NW 11 ST.</u>		
CITY	<u>PEMBROKE PINES</u>	STATE <u>FL.</u>	ZIP <u>33028</u>
NAME	<u>MICHELL BERNARD</u>		
ADDRESS	<u>16403 DIAMOND DRIVE</u>		
CITY	<u>FT. LAUDERDALE</u>	STATE <u>FL.</u>	ZIP <u>33331</u>
NAME			
ADDRESS			
CITY		STATE	ZIP

FILED
MAR 21 PM 1:32
TALLAHASSEE
SECRETARY OF STATE
FLORIDA

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	CHRISTINE KOKKINOS		
ADDRESS	15846 NW 11 ST.		
CITY	Pembroke Pines	STATE	FL ZIP 33028
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 18th day of March, 1999.

Christine Kokkinos (Seal)

____ (Seal)

____ (Seal)

STATE OF FLORIDA

COUNTY OF Broward) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

Christine Kokkinos
Signature

Christine Kokkinos (Known)
Form of Identification

Signature

Form of Identification

Signature

Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that she executed these Articles of Incorporation, that I relied upon the form of identification of the above named person as indicated opposite each name, and that an oath (was)(was not) taken.



NOTARY RUBBER STAMP SEAL
John Uustal
MY COMMISSION # CC741999 EXPIRES
June 10, 2002
BONDED THRU TROY FAIN INSURANCE, INC.

Witness my hand and official seal in the County and State last aforesaid
this 18 day of March, 1999

Notary Signature

Printed Notary Signature

John Uustal
John Uustal

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Petals Decor, Inc
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 15846 NW 11 ST.
Pembroke Pines, FL 33028

has named Christine Kokkinos

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.

Christine Kokkinos
(registered agent)

FILED
99 MAR 24 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA