

#L/13000118767

Aug-21-2013 14:44 From: 3025751642

Page: 1 of 2

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000186310 3)))



H130001863103ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

13 AUG 21 PM 5:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : AGENTS AND CORPORATIONS, INC
Account Number : 120010000112
Phone : (302) 375-0873
Fax Number : (302) 375-1642

FILED
13 AUG 21 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****
Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Black Cauldron Vapes LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

K. SALY
EXAMINER

AUG 22 2013

Electronic Filing Menu

Corporate Filing Menu

Help

H13000186310 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is: **Black Cauldron Vapes LLC.**

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is: **4417 13TH ST., SUITE 304, SAINT CLOUD, FL 34769, UNITED STATES.**

ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:

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

**Agents and Corporations, Inc.
300 Fifth Avenue South, Suite 101-330
Naples, FL 34102**

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 as provided for in Chapter 608, F.S.

Agents and Corporations, Inc.



By: **John L. Williams, President**

ARTICLE IV – Management (Check box if applicable.) ☒

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company.

ARTICLE V – Manager:

The initial Manager(s) of the Limited Liability Company shall be:
Richard Delapaz and Christopher Michael Labato


Signature of a Member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

RICHARD DELAPAZ
Typed or printed name of signer

FILED
13 AUG 21 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA