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TRANSMITTAL LETTER

FILED

NOV 20 PM 2:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

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-11/21/00--01008--002
*****78.75 *****78.75

SUBJECT: Stogies Cigar Emporium & Coffee House, Inc.

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

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUESTED

FROM: Stogies Cigar Emporium & Coffee House, Inc.

36 Charlotte Street

St. Augustine, FL 32084

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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Stogies' Cigar Emporium & Coffee House, Inc.

ARTICLE II PRINCIPAL OFFICE

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

36 Charlotte Street
St. Augustine, FL 32084

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

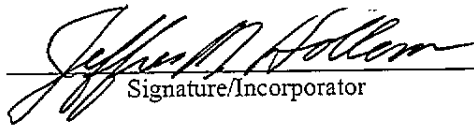
The name and Florida street address of the initial registered agent are:

Jeffrey Holleran
36 Charlotte Street
St. Augsutine, FL 32084

ARTICLE V INCORPORATOR

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

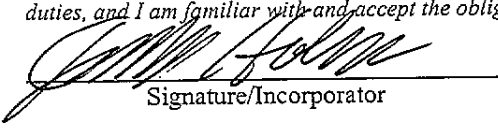
Jeffrey Holleran
36 Charlotte Street
St. Augustine, FL 32084


Signature/Incorporator

11/14/00
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/Incorporator

11/19/00
Date