

F03000001989

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

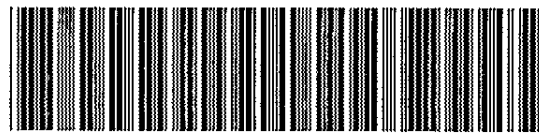
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
03 APR 21 PM 12:05
DIVISION OF CORPORATION

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03 APR 21 PM 1:36
STATE
TALLAHASSEE, FLORIDA

BK

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Tobacco Warehouse Inc

- ☐ Art of Inc. File _____
- ☐ LTD Partnership File _____
- ☒ Foreign Corp. File _____
- ☐ L.C. File _____
- ☐ Fictitious Name File _____
- ☐ Trade/Service Mark _____
- ☐ Merger File _____
- ☐ Art. of Amend. File _____
- ☐ RA Resignation _____
- ☐ Dissolution / Withdrawal _____
- ☒ Annual Report / Reinstatement _____
- ☐ Cert. Copy _____
- ☐ Photo Copy _____
- ☐ Certificate of Good Standing _____
- ☐ Certificate of Status _____
- ☐ Certificate of Fictitious Name _____
- ☐ Corp Record Search _____
- ☐ Officer Search _____
- ☐ Fictitious Search _____
- ☐ Fictitious Owner Search _____
- ☐ Vehicle Search _____
- ☐ Driving Record _____
- ☐ UCC 1 or 3 File _____
- ☐ UCC 11 Search _____
- ☐ UCC 11 Retrieval _____
- ☐ Courier _____

Signature _____

Requested by: LW #21

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tobacco Warehouse, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JAMES L. CHASE, Esquire

(Name of Person)

CHASE, Quinnell, McIver, Jackson & Marks, P.A.

(Firm/Company)

101 East Government Street

(Address)

PENSACOLA, Florida 32501

(City/State and Zip code)

For further information concerning this matter, please call:

JAMES L. CHASE

(Name of Person)

at (850) 434-3601

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☒ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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STATE
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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STATE OF FLORIDA
SECRETARY OF STATE

1. Tobacco Warehouse, Incorporated.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Alabama

(State or country under the law of which it is incorporated)

3. 82-0552704

(FEI number, if applicable)

4. June 18, 2002

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 804 Highway 59 South, Building 4, Unit 3, Summerville, Alabama 36580

(Principal office address)

804 Highway 59 South, Building 4, Unit 3, Summerville, Alabama 36580

(Current mailing address)

The wholesale selling, distributing, manufacturing and preparing of tobacco and tobacco products, and the transaction of any and all lawful business for which corporations may be incorporated under the

8. Alabama Business Corporation Act.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Sally K. Story

Pensacola Travel Company, INC.

Office Address: 6011 Montgomery Avenue

Pensacola

(City)

, Florida 32526

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Sally K. Story

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

Attached.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: n/A

Address: _____

Vice Chairman: n/A

Address: _____

Director: Marcus R. Story

Address: 1424 Chemstrand Road

Cantonment, Florida 32533

Director: Sally K. Story

Address: Pensacola Travel Company, Inc.; 6011 Montgomery Avenue

Pensacola, Florida 32526

B. OFFICERS

President: Marcus R. Story

Address: 1424 Chemstrand Road

Cantonment, Florida 32533

Vice President: n/A

Address: _____

Secretary: Sally K. Story

Address: Pensacola Travel Company, Inc.; 6011 Montgomery Avenue, Pensacola, Florida 32526

Treasurer: Sally K. Story

Address: Pensacola Travel Company, Inc.; 6011 Montgomery Avenue, Pensacola, Florida 32526

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Sally K. Story
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Sally K. Story ; Director, Secretary, Treasurer.
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

Nancy L. Worley
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Nancy L. Worley, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Tobacco Warehouse, Inc. incorporated in Baldwin County, Summerdale, Alabama on June 18, 2002. I further certify that the records do not disclose that said Tobacco Warehouse, Inc. has been dissolved.

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SECRETARY OF STATE
MONTGOMERY, ALABAMA



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

April 18, 2003

Date

Nancy L. Worley

Nancy L. Worley

Secretary of State