(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: April 28, 2014

Order#: 103404-015

Re: GENERAL CIGAR CO., INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of DE or registered agent, or both, in the State of Florida.		
	the corporation: GENERAL CIGA			
	office address:ols Road, Suite 100, Glen Allen	VA 23060		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 12/01/200	Document number: F0300006093		
	I street address of the current reg tment of State: (If resigned, ente	istered agent and registered office on file with the resigned)		
	CT CORPORATION SYSTEM			
	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION	FL 33324		
6. The name and (if changed):	ered agent (if changed) and /or registered office	明宏州		
	Corporation Service Company		156	
	1201 Hays Street			
		Box NOT acceptable		
	Tallahassee	FL 32301		
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its registered agent	t,	
Such change was authorized by !!	s authorized by resolution duly se board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.		
	2	Dona Priebe, Vice President		
	re of an officer or director	Printed or typed name and title		
I further agree to performance of agent. Or, if the hereby confirm	to comply with the provisions of my duties, and I am familiar wi is document is being filed merel	gent and agree to act in this capacity. All statutes relative to the proper and complete th and accept the obligation of my position as registered by to reflect a change in the registered office address, I builtied in writing of this change.		
By: Sign	in august	04/25/2014		
0 -	nature of Registered Agent half of an entity:	Date		
	, Assistant Vice President			
	yped or Printed Name	-		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *