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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Japan Tobacco International U.S.A., 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:
Helen Fok
(Name of Person)
JT International U.S.A., Inc.
(Firm/Company)
910 Sylvan Avenue
(Address)
Englaward Cliefe NI 07622
Englewood Cliffs, NJ 07632 (City/State and Zip code)
(Chyrotano and Zip code)
(City/State and Zip code)  For further information concerning this matter, please call:
Helen Fok at ( 201 ) 871-1210
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations Pivision of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\bigcup \\$78.75 Filing Fee & \bigcup \\$78.75 Filing Fee & \bigcup \\$87.50 Filing Fee, Certificate of Status & Certified Copy Certified Copy

### 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.

ι.	Japan Tobacco Internat:	ional U.S	.A., Inc	
(Enter name of c	orporation; must include "INCORPORAT) orp," "Inc," "Co," or "Corp.")	ED," "COMPAI	NY," "CORPORATION,"	
	JT International U.S.A	Inc		
(If name unavails	able in Florida, enter alternate corporate na	me adopted for t	he purpose of transacting busin	iess in Florida)
2. Calif	fornia	3. 95	-4037814	
(State or country	ornia under the law of which it is incorporated)		(FEI number, if applicable)	
4 2	172/86	5 Par	petual	
(Date	of incorporation)	(Duration:	Year corp. will cease to exist o	r "perpetual")
<i>c</i>	•			
6	(Date first transacted busines	ss in Florida, if p	rior to registration)	
	(SEE SECTIONS 607.1501 & 60			
7.	910 Sylvan Avenue, Engl	  ക്ഷറവർ (1)	iffe. N.T. 07632	50
	(Principal office		1110/ 10 0/002	
	010 Calarny Assessed Engl	arrand Ol	! ee - NY 03630	彭马后
	910 Sylvan Avenue, Engl (Current mailing)	ewood CII	1115, NJ 0/632	一 <del>资于 2</del> C
	(Content maning t	out only		46
0	Import and wholesale of	. aiasmati	ina	6.1
(Purpose(s)	of corporation authorized in home state or	country to be ca	arried out in state of Florida)	<u>~</u>
	t <u>address</u> of Florida registered agent: (1			ν <del>υ</del> .
Name:	Corporation Service Compa	<del></del> _		
Office Address:	1201 Hays Street			
	Tollehagas		. 20201	
	Tallahassee (City)	, Florid	(7 in code)	
	(City)		(Zip code)	
10. Registered age			and the second	
designated in this	ed as registered agent and to accept set application, I hereby accept the appoin	vice of process itment as regis	s for the above stated corpor tered agent and agree to act	ation at the place
further agree to co	mply with the provisions of all statutes	relative to the	proper and complete perfor	rmance of my duties
and I am familiar	with and accept the oblig <del>atio</del> ns of my p	position as regi	istered agent.	<b>3</b> · · <b>3</b>
_	<b>_</b> . //			
		Br A:	ian Courtney sst. V. Pres.	
_	070			
/	(Registered agent's signatur	c)	_	
11. Attached is a ce	ertificate of existence duly authenticate	d, not more the	n 90 days prior to delivery o	f this application to
the Department of S	state, by the Secretary of State or other	official having	custody of corporate records	s in the jurisdiction

under the law of which it is incorporated.

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

A. DIRECT	ORS
Chairman:	
Address:	
<del></del>	
Vice Chairman	:
Address:	
Director:	B. B. Fr.
Address:	
Director:	
Address:	ν · · · · · · · · · · · · · · · · · · ·
B. OFFICER	RS
President:	Thomas Hirshfield
Address:	910 Sylvan Avenue, Englewood Cliffs, NJ 07632
Vice President:	
Address:	
<del></del>	
Secretary:	Michael Mete
Address:	910 Sylvan Avenue, Englewood Cliffs, NJ 07632
Treasurer:	Michael Mete
Address:	910 Sylvan Avenue, Englewood Cliffs, NJ 07632
NOTE: If nor	cessary, you may attach an addendum to the application listing additional officers and/or directors.
	cessary, you may attach an addendum to the appropriate misting additional officers and/or directors.
<u>ب</u>	(Signature of Director or Officer listed in number 12 of the application)
14	Michael Mete, CFO/Secretary
	(Typed or printed name and capacity of person signing application)

#### State of California

Secretary of State



## CERTIFICATE OF STATUS DOMESTIC CORPORATION

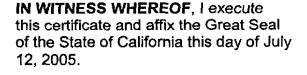
I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the 2nd day of April, 1986, JAPAN TOBACCO INTERNATIONAL U.S.A., INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.





BRUCE McPHERSON Secretary of State