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MAY 18 PM 4: 28 TO: **New Filing Section Division of Corporations** SECRETARY OF STATE TALLAHASSEE, FLORIDA Tobaccoville USA, 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: Larry Phillips
(Name of Person)

TObaccoville USA, Inc.
(Firm/Company) 1318E. Bobo Newsome Hwy.
(Address) Hartsville, SC 29550 (City/State and Zip code) For further information concerning this matter, please call: Larry Phillips at (843) 332-8242
(Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: **MAILING ADDRESS: New Filing Section** New Filing Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, \$70.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy



FILED 06 HAY 18 PM 4: 28 SECRETARY OF STATE

TALLAHASSEE, FLORIDA

March 8, 2006

LARRY PHILLIPS 1318 E. BOBO NEWSOME HWY HARTSVILLE, SC 29550

SUBJECT: TOBACCOVILLE USA, INC.

Ref. Number: W06000011369

We have received your document for TOBACCOVILLE USA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden **Document Specialist** New Filing Section

Letter Number: 506A00016190

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.

1. Tobaccoville USA, Inc.	·			
(Enter name of corporation; must include "INCORPORATED," "Co" "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	OMPANY," "CORPORATION,"			
Tobaccoville Seneca Inc.				
(If name unavailable in Florida, enter alternate corporate name adopt	ed for the purpose of transacting business in Florida)			
2. South Carolina 3	41-2057838			
2. South Carolina (State or country under the law of which it is incorporated) 3	(FEI number, if applicable)			
4. 9/4/2002 5. (Dute of incorporation) 5.	"perpetual"			
(Date of incorporation) (Du	ration: Year corp. will cease to exist or "perpetual")			
6. N/A				
(Date first transacted business in Flor (SEE SECTIONS 607.1501 & 607.1502, F	ida, if prior to registration) S. to determine nepalty liability)			
7. 1318 E. BoBo Newsom Hwy., Hartsville, S				
(Principal office address)				
P.O. Box 428, Hartsville, SC 29551				
(Current mailing address)	<u></u>			
Olare H. Divilla et al. 1984	-			
8. Cigarette Distributor to Licensed Tobacco				
(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				
Name: (T Corporation System	· · · · · · · · · · · · · · · · · · ·			
Office Address: 1200 South Pine Island Plantation (City)	M Rd. Florida 33324			
Plantation	Florida 33324 8 2			
(City)	(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 a	s 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.				
	RACHEL T. HAYES			
ASSISTANT SECRETARY				
(Registered agent's signature)	7,00,07,117,020,127,111			

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.

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

A. DIRECTORS	
Chairman:	·
Address:	
Vice Chairman:	
Address: \(\square\)	
Address: Director: Address:	
Address:O	
(0,1) P	
Director:	
Address:	SECRE
	F1 ETAIL HINSS
B. OFFICERS	8 <u>m</u>
President: Larry Phillips	FLOR F
Address: 1318 E. Bobo Newsome Hwg	28 11E 11DA
Hartsville, SC 29550	
Vice President: John M. June	
Address: 1318 E. Bobo Newsome Hwy.	
Hartsville SC 29550	
Secretary: Same as Vice President	
Address:	
Treasurer: John M. June, Jr.	
Address: 1318E. BoboNewsome Huy., Harts	ville, SC 29550
NOTE: If necessary, you may attach an addendum to the application listing add	litional officers and/or directors.
13. Chip Chip and Office Highlian number 12 of the	o application)
(Signature of Director or Officer listed in number 12 of th	е аррисации)
(Typed or printed name and capacity of person signing a	application)

The State of South Carolina



Office of Secretary of State Jim Miles Certificate of Existence

I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

TOBACCOVILLE USA, INC.,

a corporation duly organized under the laws of the State of South Carolina on September 3rd, 2002, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not malled notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 4th day of September, 2002.

Jim Miles, Secretary of State

Note: This certificate does not contain any representation concenting see or taxes eved by the Corporation to the South Cercina. Tax Commission of whether the Corporation to the South Cercina Tax Commission of whether the Corporation has paid at taxes due to the State of South Cercina, and has first the annual reports, a certificate of compilarize must be obtained from the Tax Commission.

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