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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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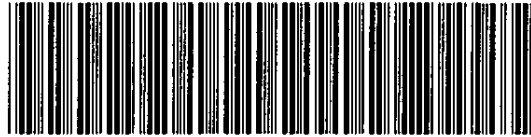
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers OCT 03 2008

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Bailey Tobacco Corporation  
(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:

Sheila F. Mason  
(Name of Person)

Bailey Tobacco Corporation  
(Firm/Company)

3662 Ontario Road, Suite C  
(Address)

Keysville, Va 23947  
(City/State and Zip code)

For further information concerning this matter, please call:

Sheila Mason at (434) 736-2130 ext. 230  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing 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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**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. Boule Tobacco Corporation  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")
2. Virginia  
(State or country under the law of which it is incorporated)
3. 54-1921362  
(FEI number, if applicable)
4. December 18, 1998  
(Date of incorporation)
5. To Present  
(Duration: Your corp. will remain to exist or "perpetual")
6. N/A  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3462 Ontario Road, Suite C, Kingsville, VA 22947  
(Principal office address)  
3462 Ontario Road, Suite C, Kingsville, VA 22947  
(Current mailing address)
8. Distribution of Tobacco Products  
(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 NOT acceptable)  
Name: CT Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(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 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.*

Anusha Putty  
Vice President  
and Assistant Secretary

[Signature]  
(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.**

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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Steven A. Bailey

Address: 341 Fort Mitchell Drive ; Chase City, VA 23924

Vice President: JoAnn Bauer

Address: 1715 Lee Drive ; Farmville, VA 23901

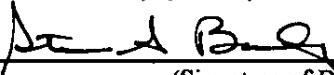
Vice President Secretary: Michael Bailey

Address: 571 Bailey Road ; Keysville VA 23947

Vice President Treasurer: Jonathan Bailey

Address: 45 Ligon Drive; Buffalo Junction, VA 24529

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

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

# Commonwealth of Virginia



## STATE CORPORATION COMMISSION

*Richmond, September 30, 2008*

*This is to certify that the certificate of organization of*

**Bailey Tobacco Corporation**

*was issued and admitted to record in this office and that the said limited liability company is authorized to transact its business subject to all Virginia laws applicable to the company and its business. Effective date: December 18, 1998*



*State Corporation Commission*

*Attest:*

*Joel H. Beck*  
Clerk of the Commission