# F09000002219

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Entity Name)				
(Document Number)				
(Bootiment Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
RECEIVED JUN - 1 2009				



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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

Office Use Only

EP 6/3/09

## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: AMERICAN CIGARET	TE AND TOBACCO CO.
	poration - must include suffix
Dear Sir or Madam:	
	ation for Authorization to Transact Business in Florida," itted to register the above referenced foreign corporation to
Please return all correspondence concerning thi	is matter to the following:
Lin	da Friedman
N	Name of Person
American Cia	arette and Tobacco Co.
<u> </u>	irm/Company
2708 Comr	nerce Way, Suite 300
, ,	Address
Philade	elphia, PA 19154
	y/State and Zip code
welsh	n1160@aol.com
	be used for future annual report notification)
For further information concerning this matter,	please call:
Linda Friedman at (	215 \ 464-7300
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 \$\int \text{S78.75 Filing Fee & Certificate of State}	

# 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.	American Ci	igarette and Tobacco Co.		
		orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
	(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	
2.	Pennsylvani	ia 3	2189477	
		under the law of which it is incorporated)	(FEI number, if applicable)	
4.	12/14/1992	5.	Perpetual	
••		of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
6.	Not Applicat	ole		
		(Date first transacted business in	02, F.S., to determine penalty liability)	
/٠.	1000 0. 0002	(Principal office addr		-
	Same as abo	ove	SE P	
		(Current mailing add	ress)	
8.	Loans		LORID	
	(Purpose(s	s) of corporation authorized in home state or co	untry to be carried out in state of Florida)	
9.	Name and stree	et address of Florida registered agent: (P.O.	. Box NOT acceptable)	
	Name:	Avangard Auto Finance, Inc.		
Oi	ffice Address:	1890 S. Ocean Drive Apt. 204E	<u> </u>	
		Hallandale	, Florida 33009	
		(City)	(Zip code)	
He de fu	aving been nam signated in this rther agree to co	application, I hereby accept the appointm	ce of process for the above stated corporation at the pla nent as registered agent and agree to act in this capacity clative to the proper and complete performance of my distinct as registered agent.	y. I

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director: Linda Friedman	<del></del>
Address: 2708 Commerce Way, Suite 300	
Philadelphia, PA 19154	
Director: Simon Friedman	
Address: 2708 Commerce Way, Suite 300	<del></del>
Philadelphia, PA 19154	
B. OFFICERS	1AL 56
President: Linda Friedman	A E
Address: 2708 Commerce Way, Suite 300	ASS
Philadelphia, PA 19154	लू ३ गा
Vice President:	STAT LOR
Address:	A A
Secretary: Linda Friedman	
Address: (see above)	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional office	cers and/or directors.
13. Signature of Director or Officer listed in number 12 of the application	
(Signature of Director of Officer listed in number 12 of the applicant	nı,
(Typed or printed name and capacity of person signing application)	)

#### COMMONWEALTH OF PENNSYLVANIA

#### DEPARTMENT OF STATE

MARCH 20, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING

PALLAHASSEE. FLORIDA

I DO HEREBY CERTIFY THAT,

### AMERICAN CIGARETTE AND TOBACCO CO.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth