## L13000160566

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<u></u>
(Cit	ty/State/Zip/Phone #	)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Vaping Genie LLC (Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
Eugenial. Comp Vaping Genie LLC (Firm/Company) 1813 Creighton Rd. 5TE. D (Address) Pensacola, Fl. 32504 (City, State and Zip Code) Vapingaenie @ Mahoo. Com
E-mail address: (to be used for future annual report notifications)
For further information concerning this matter, please call:  Eugenia L. Comp at (903) 340 - 9899  (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:    150.00 Filing Fees   \$155.00 Filing Fees   \$180.00 Filing Fees   \$185.00 Filing Fee
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AKTICLE I - Name:				
The name of the Limited Liability Company is:				
Vaping Genie LL	_C.			
(Must end with the words "Limited Liability Company, the abbrevia	ation "L.L.C.," or the designation "LLC.")			
ARTICLE II - Address: The mailing address and street address of the princ	cipal office of the Limited Liability Company	is:		
Principal Office Address:	Mailing Address:			
1813 CreightmRd, SteD Pensacola, Fl. 32504	2450 Creighton Rd #B Pensacola, FP. 32504	<del>-</del> -		
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)				
The name and the Florida street address of the regi	stered agent are:			
Eugenia I	- Crump	SECRE	2013 NOV	-7
<u> 2450 Creial</u> Florida street address (P.	NTDORATE O. Box <u>NOT</u> acceptable)	ANY OF	11	Trr
Pensacola City, St.	FL 32502/ ate, and Zip	STATE	M II: 17	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" - Managing I	Member	
"bwner/Presi	ident" 2450 Crejanton Rd #B Pensacola, F1.32504	
	•	
(Use attachment if neces	ssary)	
ARTICLE V: Effective date,	if other than the date of filing: December 2, 2013	•
	t be prior to nor more than 90 days after the date this document is f	
	state; <u>AND</u> 2) must be the same as the effective date listed in the at an effective date listed therein.)	itached
· · · · · · · · · · · · · · · · · · ·	A P	
REQUIRED SIGNATURE:		型更加
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Signature of a me	ember of an authorized representative of a member.	102
the penalties of perjury that t	508.408(3), Florida Statutes, the execution of this document constitutes an affirmation the facts stated herein are true. I am aware that any false information submitted in a tof State constitutes a third degree felony as provided for in s.817.155, F.S.)	on under
E)	iaenia L. Coump	
	Typed or printed name of signee	

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