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EXAMINER

MAY - 5 2014

FLORIDA FILING & SEARCH SERVICES, INC.

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155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 5/2/14

NAME: U.S SMOKELESS TOBACCO MANUFACTURING COMPANY LLC

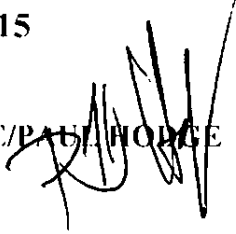
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: U.S. Smokeless Tobacco Manufacturing Company LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

Capitol Services - Corporate Filings Team
Firm/Company

800 Brazos, Ste 400

Address

Austin, TX 78701

City/State and Zip Code

karen.o.earls@altria.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at (_____) _____

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☒ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: U.S. Smokeless Tobacco Manufacturing Company LLC

2. Jurisdiction of its organization: Virginia

3. Date authorized to do business in Florida: March 26, 2014

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

U.S. Smokeless Tobacco Company LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: _____

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

Agustin E. Rodriguez

Typed or printed name of signee

Filing Fee: \$25.00

FILED
2014 MAY -2 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

The name of U.S. SMOKELESS TOBACCO MANUFACTURING COMPANY LLC was changed to U.S. Smokeless Tobacco Company LLC pursuant to a certificate of merger and restatement issued by the Commission effective as of May 1, 2014.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:
April 29, 2014*

Joel H. Peck

Joel H. Peck, Clerk of the Commission