

P0000090030

Outland, Inc.
7 Watermill Court
Savannah, GA 31419

TRANSMITTAL LETTER

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****175.00 ****87.50

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314-6327

Subject: Outland Knife & Cigars, Inc.

Gentlemen:

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for \$87.50 for filing fee, certified copy and certificate of status for the above-named entity.

Thanking you for your cooperation in this matter.

Sincerely yours,

Pat West

Mrs. Pat West
7 Watermill Court
Savannah, GA 31419
Daytime Telephone #: 1-877-698-1668

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00 SEP 21 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9-25
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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purposes of forming a corporation under the Florida Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I- NAME

The name of the corporation shall be:
Outland Knife & Cigars, Inc.

ARTICLE II- PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1910 Wells Road
Orange Park Mall
Orange Park, FL 32073

ARTICLE III- SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One thousand (1000) shares

ARTICLE IV- INITIAL REGISTERED AGENT AND STREET ADDRESS

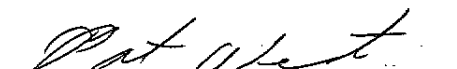
The name and Florida address of the initial registered agent is:

Mrs. Pat West
1910 Wells Road, Orange Park Mall
Orange Park, FL 32073

ARTICLE V- INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Mrs. Pat West
1910 Wells Road, Orange Park Mall
Orange Park, FL 32073


Signature of Incorporator

9-19-2000
Date

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TALLAHASSEE, FL 32399

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Having been named as registered agent and to accept service of process for the above stated corporation 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.

Pat West

Registered Agent

9-19-2000

Date

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TALLAHASSEE, FLORIDA