

TRANSMITTAL LETTER

P00000093449

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

SUBJECT: DIXIE TOBACCO, CO.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

400003413394--8
-10/04/00--01027--001
*****87.50 *****87.50

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Robert J. Haavisto
Name (Printed or typed)

6271-24 St. Augustine Rd. Suite 237
Address

Jacksonville, Florida 32217
City, State & Zip

904-737-2712
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 OCT -4 AM 9:10

APPROVED
AND
FILED

NOTE: Please provide the original and one copy of the articles.

Will wait

RECEIVED
00 OCT -4 AM 9:04
DIVISION OF CORPORATION

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

DIXIE TOBACCO, CO.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6271-24 St. Augustine Rd. Suite 237
Jacksonville, FL 32217

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wholesale Cigarette Distributor

ARTICLE IV SHARES

The number of shares of stock is:

1000 Shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Pres. Robert J. Haavisto
2434 Castellon Dr. N.
Jacksonville, FL 32217

ARTICLE VI REGISTERED AGENT

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

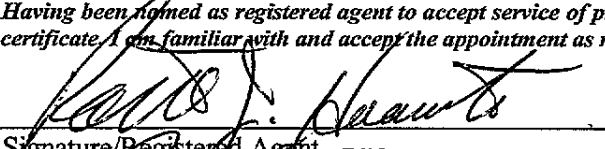
Robert J. Haavisto
2434 Castellon Dr. N.
Jacksonville, FL 32217

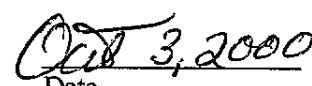
ARTICLE VII INCORPORATOR

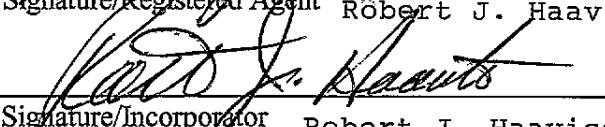
The name and address of the Incorporator is:

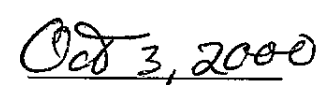
Robert J. Haavisto
2434 Castellon Dr. N.
Jacksonville, FL 32217

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent Robert J. Haavisto


Date


Signature/Incorporator Robert J. Haavisto


Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 OCT -4 AM 9:10

APPROVED
AND
FILED