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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019
Phone : (305)552-5973
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FLORIDA PROFIT CORPORATION OR P.A.

CUBAN JOE'S CIGAR SHOP COMPANY

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78,75

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ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

CUBAN JOE'S CIGAR SHOP COMPANY

ARTICLE II - PRINCIPAL OFFICE

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

425 GREENE STREET KEY WEST, FL 33040



<u>ARTICLE III -SHARES</u>

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

IRMA L. BOVEDA 425 GREENE STREET KEY WEST, FL 33040

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ARTICLE V - INCORPORATOR

LAZARUS CORPORATION

The name and street address of the incorporator to these Articles of Boveda IRMa L. Incorporation is:

The undersigned incorporator has executed these Articles of Incorporation this 20 day of October 2000

Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (a) e):

IRME L. Boveda President 425 Greene Street Key West, FL 3:3040

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature