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Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION
Trust Tobacco Company

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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| Page Count | 02 |
| Estimated Charge | \$70.00 |

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T. Burch NOV 28 2011

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COVER LETTER

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

SUBJECT: Trust Tobacco Company
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Capitol Services Corporate Filings Team
Name (Printed or typed)

800 Brazos, Suite 400
Address

Austin, TX 78701
City, State & Zip

(800) 345-4647
Daytime Telephone number

kreichlin@krcl.com
E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: **Trust Tobacco Company****ARTICLE II PRINCIPAL OFFICE**Principal street address
4129 Southerland Rd. Ste. D
Houston, TX 77092

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is:
Exporting cigarettes and tobacco products.**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: **Moses Musallam, Sole Director**
Address: **4129 Southerland Rd. Ste. D**
Houston, TX 77092

Name and Title:

Address:

Name and Title:
Address:

Name and Title:

Address:

Name and Title:
Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: **Capitol Corporate Services, Inc.**
Address: **155 Office Plaza Dr. Ste. A**
Tallahassee, FL 32301**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: **Karen Reichlin**
Address: **819 Millam Suite 2200**
Houston, TX 77002

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.

Gayle Windle, Assistant Secretary on
behalf of Capitol Corporate Services, Inc.*Gayle Windle*

Required Signature/Registered Agent

Date

11/22/2011

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Karen Reichlin
KAREN REICHLIN

Required Signature/Incorporator

11-22-2011
Date

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