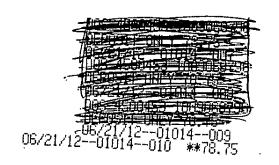
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Special Instructions to	Filing Officer:	

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VENETY OF STATE

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COVER LETTER

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

SUBJECT:	Vapor	Group, Inc.	
7		TE NAME – <u>MUST INCI</u>	
Enclosed are an or	iginal and one (1) copy of the arti	icles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
FROM: _		r Svorai e (Printed or typed)	·····
	19495 Bisca	yne Blvd., Suite 4 Address	111
	Aventura City,	a, Florida 33180 State & Zip	
_	(954 Daytime T)383-0734 élephone number	·····
_	DSvora E-mail address: (to be used	ai@Hotmail.Com	notification)

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

ARTICLES OF INCORPORATION

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

The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address 1900 Tamiami Trail Naples, Florida 34102 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any and all lawful business. ARTICLE IV SHARES The number of shares of stock is: 350,000,000 common @ \$0.001 par value; 10,000,000 preferred @ \$0.001 par value. (See attached, The number of shares of stock is: ADDENDUM TO ARTICLES OF INCORPORATION OF VAPOR GROUP, INC., Article IV Authorized Stock				FILED			
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June 20, 2012	•	Required Signature/Registered Agent			Dat	e	
June 20, 2012	submit this documen	nt and affirm that the facts stated herein are	true. I am aware	that the false i	nformation s	submitted in a	
Required Signature/Incorporator Date	ocument to the Depar	tment of State constitutes a third degree felony	as provided for in	s.817.155, F.S.	•		
Required Signature/Incorporator Date					June 20	2012	
		Required Signature/Incorporator	 	,			