

P12000098698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

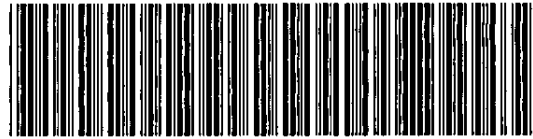
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W12000058005



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11/15/12--01018--002 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 NOV 30 PM 2:26

12/3/12

COVER LETTER

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

SUBJECT: VaperMate at Stuff-n-Puffs Ltd

(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: Linda G Botta

Name (Printed or typed)

553 E Highland Rd

Address

Macedonia, OH 44056

City, State & Zip

330-467-2000

Daytime Telephone number

Linda@stuffnpuffs.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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FLORIDA DEPARTMENT OF STATE
Division of Corporations

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 NOV 30 PM 2: 24

November 16, 2012

LINDA G BOTTA
553 E HIGHLAND ROAD
MACEDONIA, OH 44056

SUBJECT: VAPERMATE AT STUFF-N-PUFFS LTD
Ref. Number: W12000058005

We have received your document for VAPERMATE AT STUFF-N-PUFFS LTD and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the name of the corporation in Article I.

The use of the abbreviation "Ltd." does not clearly indicate that this is a corporation instead of a partnership. Therefore, please remove the abbreviation "Ltd." from the corporate name."

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 512A00027718

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: **VAPERMATE AT STUFF-N-PUFFS INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
553 E Highland Road #1
Macedonia, OH 44056

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Linda G Botta
Address: 553 E Highland Rd #1
Macedonia, OH 44056

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:

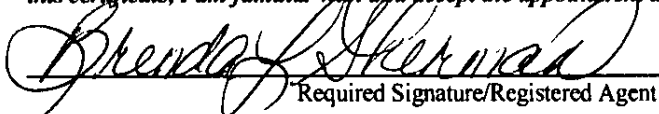
Name: Brenda Sherman
Address: 1284 Country Road
Port Orange, FL 32129

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Linda G Botta
Address: 553 E Highland Rd #1
Macedonia, OH 44056

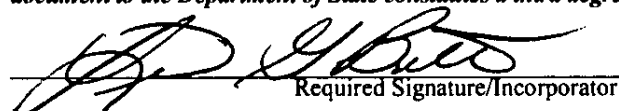
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

11/12/12

Date

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.


Required Signature/Incorporator

11/12/12

Date

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