

PI6000042449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
*wile-17751*

Office Use Only



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02/29/16--01033--021 \*\*105.00

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MAY 17 2016

16 MAY 17 AM 10:11

APR 24  
MAY 17 2016

MAY 17 2016  
S. PRATHER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 9, 2016

ROY NIAZOV  
18149 NE 19TH AVE  
NORTH MIAMI BEACH, FL 33162

SUBJECT: THE BATHING VAPE LLC  
Ref. Number: W16000017751

We have received your document for THE BATHING VAPE LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return 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.

Stacy Prather  
Regulatory Specialist III

Letter Number: 416A00004908

W1600017751

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** OHM CITY VAPES INC

\_\_\_\_\_  
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

ROY NIAZOV

\_\_\_\_\_  
Contact Person

THE BATHING VAPE LLC

\_\_\_\_\_  
Firm/Company

18149 NE 19TH AVE

\_\_\_\_\_  
Address

NORTH MIAMI BEACH, FL 33162

\_\_\_\_\_  
City, State and Zip Code

ROY@THEBATHINGVAPES.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROY NIAZOV

at ( 305 ) 710-8828

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$105.00 Filing Fees
- \$113.75 Filing Fees and Certificate of Status
- \$113.75 Filing Fees and Certified Copy
- \$122.50 Filing Fees, Certified Copy, and Certificate of Status

**STREET ADDRESS:**

New Filings Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filings Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**RECEIVED**  
 16 MAY 17 AM 10:55  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Profit Corporation**

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity" into a Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

THE BATHING VAPE LLC

44-162082

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY  
(Enter entity type. Example: limited liability company, limited partnership,  
general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of FLORIDA  
(Enter state, or if a non-U.S. entity, the name of the country)

on OCTOBER 17TH 2014

Enter date "Other Business Entity" was first organized, formed or incorporated

RECEIVED  
STATE DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA

16 MAY 17 AM 10:11

RECEIVED  
STATE DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

OHM CITY VAPES INC

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_

**(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)**

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 10TH day of MAY, 2016.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: ROY NIAZOV

Printed Name: Roy NIAZOV Title: PRESIDENT

**Required Signature(s) on behalf of Other Business Entity:** [See below for required signature(s).]

Signature: *Roy Niazov*  
Printed Name: ROY NIAZOV Title: PRESIDENT

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

APPROVED  
FILED  
16 MAY 17 AM 10:11

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

FILED  
MAY 17 2011  
CLERK OF CIRCUIT COURT  
MIAMI COUNTY, FLORIDA

16 MAY 17 AM 10:14

APR 1 2011

**ARTICLE I NAME**

The name of the corporation shall be: OHM CITY VAPES INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

Principal street address

Mailing address, if different is:

18149 NE 19TH AVE

NORTH MIAMI BEACH, FL 33162

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LEGAL BUSINESS.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ROY NIAZOV

Name and Title: \_\_\_\_\_

Address: 18149 NE 19TH AVE

Address: \_\_\_\_\_

NORTH MIAMI BEACH, FL 33162

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: ROY NIAZOV  
Address: 18149 NE 19TH AVE  
NORTH MIAMI BEACH, FL 33162

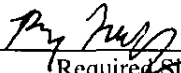
**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: ROY NIAZOV  
Address: 18149 NE 19TH AVE  
NORTH MIAMI BEACH, FL 33162


\*\*\*\*\*

*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

5/10/2016  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any 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

5/10/2016  
Date

16 MAY 17 AM 10:11  
FILED  
MAY 17 2016