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(Requestor's Name)				
10.224				
(Address)				
(Address)				
(Article 20)				
(City/State/Zip/Phone #)	_			
(St. pototo: Elips: Welle :)				
PICKIUP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	_			
Special Instructions to Filing Officer				
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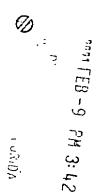
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CORPORATE WE ACCESS,

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

WALK III						
	PICK U	P: 02/05/2021				
xx	CERTIFIED COPY PHOTOCOPY					
	CUS					
xx	FILING	ARTICLES				
•	Live Oak Smoke Shop I					
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•	(CORPORATE NAME AND DOCUMEN	f'#)				
	(CORPORATE NAME AND DOCUMEN	Γ#)				
	(CORPORATE NAME AND DOCUMEN	Γ#)				
•	(CORPORATE NAME AND DOCUMEN'	Γ#)				
	(CORPORATE NAME AND DOCUMEN'	Γ#)				
PECIA NSTRU	L CTIONS:					

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

	CID II ARRIAR		
KIICLE II PRIN	CIPAL OFFICE Principal street address	Mailing addre	ess, if different is:
1100 S Ohio Ave	······································		
Live Oak, Fl 32064			
ARTICLE III PURP	OSE the corporation is organized is: Smoke Shi	op	
			202
ARTICLE IV SHAR. The number of shares of			- 6 - 6 - 6
IRTICLE V INITIA	AL OFFICERS AND/OR DIRECTORS		۲۹ ۱۳۵۰ نور ک
Name and Title	Maheshkumar Patel. President e:	Name and Title:	• •
Address	1100 S Ohio Ave	Address:	-
	Live Oak, Fl 32064		
			
Name and Title	:	Name and Title:	
Address		Address:	
	·		
Name and Title		Name and Title:	
Name and Title. Address		- 11	

Name and Title:		Name and Title:	
Addres	ss	Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Maheshkumar Patel		
Address:	1100 S Ohio Ave		
	Live Oak, Fl 32064		
ARTICLE VII	INCORPORATOR		
The name and a	ddress of the Incorporator is:		
Name:	Maheshkumar Patel		
Address:	1100 S Ohio Ave		
	Live Oak, Fl 32064	 -	
Effective date, it	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and can	. (OPTIONAL) nnot be more than five days prior or 90 days afte	er the
	e inserted in this block does not meet the applicate effective date on the Department of State's record	ble statutory filing requirements, this date will not bls.	oe listed as
	med as registered agent to accept service of proc am familiar with and accept the appointment as	ess for the above stated corporation at the place d registered agent and agree to act in this capacity	esignated in
Mah	eshkumar Fatel	02/19/2021	
	Required Signature/Registered Agent	Date	
	cument and affirm that the facts stated herein a Department of State constitutes a third degree fe	are true. I am aware that the false information sullony as provided for in s.817.155, F.S.	bmitted in a
.Mahe	eshkumar Fatel	02/19/2021	
Requ	ired Signature/Incorporator	Date	