

P24000005579

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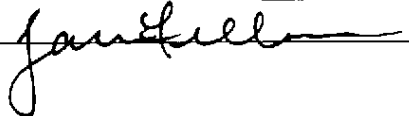
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2024 JAN 16 AM 11:12

RECEIVED OF STATE
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-624

PLEASE USE FUNDS FROM THIS ACCOUNT: 120210000160: \$70.00

AUTHORIZATION SIGNATURE: 

In & Out Smoke & Vape INC.

BUSINESS

Document

 Walk in

 Pick up time

 Mail out

 Will wait

 Certified copy of articles of incorporation

 Certified of Status

 Certificate of Status

NEW FILINGS

 Profit

 Not for Profit

 Limited Liability

 Domestication

 Other

 X CORP

AMMENDMENTS

 Amendment

 Resignation of R.A. Officer/Director

 Change of Registered Agent

 Dissolution/Withdrawal

 Merger

 Conversion

OTHER FILINGS

 Annual Report

 Fictitious Name

 APOSTIL ()
 Country

REGISTRATION/QUALIFICATIONS

 Foreign filing

 Limited Partnership

 Reinstatement

 Other

EXAMINER'S INITIALS:

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
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PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$70.00 _____

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_____ In & Out Smoke & Vape INC.
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OTHER FILINGS

_____ Annual Report
_____ Fictitious Name

_____ APOSTIL () _____
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_____ Conversion

REGISTRATION/QUALIFICATIONS

_____ Foreign filing
_____ Limited Partnership
_____ Reinstatement

_____ Other



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 19, 2024

FLORIDA CAPITAL COURIER SERVICES, INC

SUBJECT: IN & OUT SMOKE & VAPE INC.
Ref. Number: W24000006501

We have received your document for IN & OUT SMOKE & VAPE INC.. However, the document has not been filed and is being returned for the following:

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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

KAIN COSTELLO
Regulatory Specialist II
New Filing Section

Letter Number: 924A00001165

RECEIVED
2024 JAN 22 PM 3:48
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: In & Out Smoke & Vape Inc.

(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Brett Isaac

Name (Printed or typed)

2151 University Blvd S

Address

Jacksonville, FL 32216

City, State & Zip

904-730-9264

Daytime Telephone number

Brett@isaactaxcpa.com

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

ARTICLE I NAME

The name of the corporation shall be: In & Out Smoke & Vape Inc

ARTICLE II PRINCIPAL OFFICE

3518 Grand Blvd. Principal street address Mailing address, if different is:
New Port Richey, FL 34653

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Operate a vape shop

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shadi Aboeid President Name and Title: _____

Address 3518 Grand Blvd Address: _____

New Port Richey, FL 34653

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Brett Isaac
Address: 2151 University BLvd S
Jacksonville, FL 32216

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Brett Isaac
Address: 2151 University Blvd S
Jacksonville, FL 32216

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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.

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
Date 1/15/24

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
Date 1/15/24

2024
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