TRANSMITTAL LETTER ahassee, FL 32314 (Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **2** \$78.75 **\$122.50** \$70.00 \$131.25 Filing Fee Filing Fee Filing Fee, Filing Fee & Certificate & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED 8460 SW 35 terr Mia Mi fl 33155

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

The Cigar Group, Inc.

97 FEB 21 PH 4: 00
SECRETARY OF STATE
SECRETARY OF STATE

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8460 SW 35 ter Miami fl, 33155

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000, ONE Thousand

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Alberto Medina 8460SW 35 Terr MiaMi, FI 33155

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Alberto Medina GRACIELA MEDINA 8460 SW 35 TOIN Miami, fl 33155 "Same Aboue"

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

19 day of FEBRUARY, 19 97.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is	THE CIGAR GROUP, 11	າ (
2. The name and address of the regi	ered agent and office is:	
Albe	To Medina (NAME)	
8460	SW 35 Terr With (1 3 2 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
Mi	OX OF MAIL Drop BOX NOT ACCEPTABLE) M: 41 33155 (CITY/STATE/ZIP) (CITY/STATE/ZIP)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

2/19/97 (SIGNATURE) (DATE)