

CONTACT:

OFFICE USE ONLY (Document #)

P97000081966

UCC FILING & SEARCH SERVICES

(Requestor's Name)

526 EAST PARK AVENUE SUITE 200

(Address)

TALLAHASSEE FL 32301

(City, State, Zip)

(904) 681-6528

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

100002318091--1

-10/13/97--01001--019

\*\*\*\*\*35.00 \*\*\*\*\*35.00

1 Smoking West Inc.

(Corporation Name)

(Document #)

2 \_\_\_\_\_  
(Corporation Name)

(Document #)

3 \_\_\_\_\_  
(Corporation Name)

(Document #)

4 \_\_\_\_\_  
(Corporation Name)

(Document #)

☒ Walk In

☐ Pick Up Time

☐ Mail Out

☐ Will Wait

☐ Photocopy

☐ Certified Copy

☐ Certificate of Status

☐ Certificate of Good Standing

☐ ARTICLES ONLY

☐ ALL CHARTER DOCS

☐ Certificate of FICTITIOUS NAME

☐ FICTITIOUS NAME SEARCH

☐ CORP SEARCH

NEW FILINGS
<input type="checkbox"/> Profit
<input type="checkbox"/> NonProfit
<input type="checkbox"/> Limited Liability
<input type="checkbox"/> Domestication
<input type="checkbox"/> Other

AMENDMENTS
<input type="checkbox"/> Amendment
<input type="checkbox"/> Resignation of R. A. Officer/Director
<input checked="" type="checkbox"/> Change of Registered Agent
<input type="checkbox"/> Dissolution/Withdrawal
<input type="checkbox"/> Merger

OTHER FILINGS
<input type="checkbox"/> Annual Report
<input type="checkbox"/> Fictitious Name
<input type="checkbox"/> Name Reservation

REGISTRATION/QUALIFICATION
<input type="checkbox"/> Foreign
<input type="checkbox"/> Limited Partnership
<input type="checkbox"/> Reinstatement
<input type="checkbox"/> Trademark
<input type="checkbox"/> Other

RECEIVED  
97 OCT 10 PM 4:17  
DIVISION OF CORPORATION  
TALLAHASSEE, FLORIDA

HOLD FOR  
PICKUP BY Charge  
UCC SERVICES

Examiner's Initials

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: SMOKEY WEST, INC.

2. The mailing address of the corporation is: 1029 Truman Avenue  
Key West, FL 33040

3. Date of incorporation/qualification: 09/22/97 Document number: P97000081966

4. The name and address of the current registered agent and office:

UCC Filing & Search Services, Inc.

526 East Park Avenue, Suite 200

Tallahassee, FL 32301

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

David E. Johnson

1029 Truman Avenue

Key West, FL 33040

CLERK OF STATE  
TALLAHASSEE, FLORIDA

97 OCT 10 PM 4:17

FILED

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

[Signature] 20 Oct 97  
(Signature of an officer, chairman or vice chairman of the board) (Date)

David E. Johnson - President / Director  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

[Signature] 20 Oct 97  
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

David E. Johnson  
(Typed or Printed Name)

President / Director  
(Capacity)