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TRANSMITTAL LETTER

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

SUBJECT: SMOKER UNITED ENTERPRISES, INC.

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

_____	\$70.00
	Filing Fee
<u>  X  </u>	\$78.75
	Filing Fee & Certificate
_____	\$122.50
	Filing Fee & Certificate Copy
_____	\$131.25
	Filing Fee, Certified Copy & Certificate

400002607724--4  
-08/05/98--01040--005  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

FROM:

Susan Smoker  
520 Brightview Dr.  
Lake Mary, FL 32746

FILED  
98 AUG -5 PM 2:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

TA-8/10/98

## **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 SMOKER UNITED ENTERPRISES, INC.

### **ARTICLE II - PRINCIPAL OFFICE**

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

520 Brightview Drive  
Lake Mary, FL 32746

### **ARTICLE III - SHARES**

The number of stock that this corporation is authorized to have outstanding at any one time is 1000 shares (Common Stock), \$1.00 par value per share. Susan Smoker will own 510 shares and Bryan Smoker will own 490 shares of the corporation.

### **ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Susan Smoker  
520 Brightview Drive  
Lake Mary, FL 32746

### **ARTICLE V - TERM OF EXISTENCE**

This corporation is to exist perpetually.

### **ARTICLE VI - DIRECTORS**

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have two Directors. The name and address of the initial members of the Board of Director are:

Susan Smoker, Pres./Secretary  
520 Brightview Dr.  
Lake Mary, FL 32746

Bryan Smoker, Vice-Pres./Treasurer  
520 Brightview Dr.  
Lake Mary, FL 32746

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## ARTICLE VII – OFFICERS

The name and address of the initial officer of the corporation who shall hold office for the first year of the corporation or until their successor is elected or appointed is:

Susan Smoker  
520 Brightview Dr.  
Lake Mary, FL 32746

## ARTICLE VIII – PREEMPTIVE RIGHTS

The corporation elects to have preemptive rights.

## ARTICLE IX – INCORPORATOR (S)

The name and street address of the incorporators to these Articles of Incorporation is:

Susan Smoker  
President/Secretary  
520 Brightview Dr.  
Lake Mary, FL 32746

Bryan Smoker  
Vice-President/Treasurer  
520 Brightview Dr.  
Lake Mary, FL 32746

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 31 day of July, 1998.

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

Signature: Susan Smoker 7/31/98  
SUSAN SMOKER

Signature: Bryan Smoker 7/31/98  
BRYAN SMOKER

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 LAW OF THE  
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN  
DESIGNATING THE REGISTERED OFFICER/REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

1. Name of the corporation is:  
  
SMOKER UNITED ENTERPRISES, INC.
2. The name and address of the registered agent office is:  
Susan Smoker  
520 Brightview Dr.  
Lake Mary, FL 32746

Having been named as registered agent and to accept service of process for the above  
state 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 am familiar with and accept the obligations of my position  
as registered agent.

Susan Smoker  
Signature

7-31-98  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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