

TRANSMITTAL LETTER

P99000005669

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

SUBJECT:

Claud G Tobacco and Gifts, Inc
(Proposed corporate name - must include suffix)

500002748385--3
-01/20/99--01083--022
*****87.50 *****87.50

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM:

Judy Perkins / Claud G Tobacco and Gifts, Inc
Name (Printed or typed)

315-G North Copeland Street
Address

Tallahassee, FL 32304
City, State & Zip

(850) 222-4046
Daytime Telephone number

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

T. SMITH JAN 20 1999

FILED

99 JAN 20 PM 1:16

RECEIVED

99 JAN 20 PM 1:08

SECRETARY OF STATE
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Cloud 9 Tobacco + Gifts, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Tallahassee, Florida

315-G North Copeland Street
Tallahassee, FL 32304

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

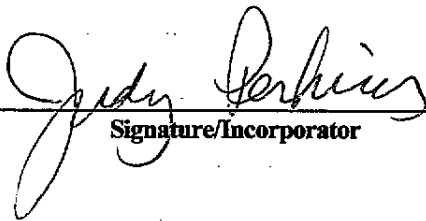
Richard Gutierrez

185 West Weatherbine Way
Tallahassee, FL 32301

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Judy Perkins
185 West Weatherbine Way
Tallahassee, FL 32301



Signature/Incorporator

1-20-99

Date

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

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.


Signature/Registered Agent

1-20-99

Date

FILED
JAN 20 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA