TRANSMITTAL LETTER	SECRETFILED
Department of State Division of Corporations	SECRETARY OF STATE DIVISION OF CORPORATIONS
Division of Corporations P. 0. Box 6327 Tallahassee, FL 32314	99 HAR II AM 8:20
SUBJECT: CIGAR FACTORY OUTLET, INC	18

(Proposed corporate name - must include suffix)

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

L1 \$70.00 Filing Fee

X\$78.75 Filing Fee & Certificate of Status

LJ\$78.75 Filing Fee & Certified Copy

LJ \$87.50 Filing Fee, Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

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FROM: MONICA JORDAN Name (Printed or typed)

2251 Hammondville Road -Address

Pompano Beach, FL 33069 City, State & Zip

(954) 917-6761 Daytime Telephone number

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

ARTICLES OF INCORPORATION 99 MAR 1 / AND The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the.following Articles of Incorporation.

NAME ARTICLE I The name of the corporation shall be: CIGAR FACTORY OUTLET, INC

PRINCIPAL OFFICE ARTICLE II The principal place of business and mailing address of this corporation shall be: 2251 HAMMONDVILLE ROAD POMPANO BEACH, FL 33069

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)

<u>ARTICLE IV INITIAL REGISTERED AGENT AND STREET A</u>DDRESS

The name and Florida street address of the initial registered agent are: STEVE JOHNSON 2251 HAMMONDVILLE ROAD POMPANO BEACH, FL 33069

INCORPORATOR ARTICL<u>E V</u> The name and address of the incorporator to these Articles of Incorporation are: MONICA JORDAN 2251 HAMMONDVILLE ROAD POMPANO BEACH, FL 33069

/Incorpoi

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

Having been named as registered agent and to accept service ofprocess 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. If urther 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