

L13000000469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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JUN 13 2013

T. HAMPTON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
13 JUN 12 AM 6:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 30, 2013

MIKE VITITOE
1499 SW 30TH AVE
STE 29
BOYNTON BEACH, FL 33426

SUBJECT: CHEAP ECIGS LLC
Ref. Number: L13000000469

We have received your document for CHEAP ECIGS LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$30.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II

Letter Number: 913A00013570

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Chapeciqs LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1-2-13 and assigned
Florida document number L13000000469.

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This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1499 SW 30th Ave Suite 29
Bonita Bch, FL 33426

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as above

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

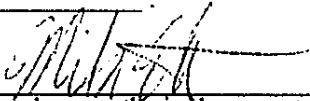
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	Add
_____	_____	_____	Remove
_____	_____	_____	Add
_____	_____	_____	Remove
_____	_____	_____	Remove
_____	_____	_____	Add
_____	_____	_____	Remove
_____	_____	_____	Add
_____	_____	_____	Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 5-21-13



Signature of a member or authorized representative of a member

Michael Vitale

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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