

#L130000/6862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
OCT -1 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Revolution Vapo E Cigarettes, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tristan OConnell
Name of Person

4260
4260 Park Blvd.
Address

Pineellas Park, FL 33781
City/State and Zip Code

tristan.oconnell@mac.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tristan OConnell at (727) 544-0693
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Revolution Vapor E-Cigarettes, LLC

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

FILED
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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 2/1/13 and assigned
Florida document number L13000016862.

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)

4260 Park Blvd

Pinellas Park, FL 33781

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4260 Park Blvd

Pinellas Park, FL 33781

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:

Tristan OConnell

New Registered Office Address:

4260 Park Blvd

Enter Florida street address

Pinellas Park

Florida 33781

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:

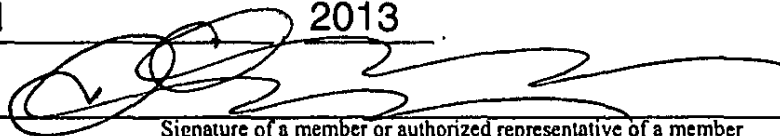
MGR = Manager

MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|---------------------------|--|
| MGR | Jay Goldberg | 1449 48th Ave NE | <input type="checkbox"/> Add |
| | | St. Petersburg FL 33703 | <input checked="" type="checkbox"/> Remove |
| MGR | Richard Boensch | 1851 Bayou Grande Blvd NE | <input type="checkbox"/> Add |
| | | St. Petersburg FL 33703 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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| | | | <input type="checkbox"/> Remove |

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

Dated July 1 2013



Signature of a member or authorized representative of a member

Tristan O'Connell

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00