L18000014859

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COVER LETTER

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SHRIECT		Cigars LLC			
SUBJECT	•	Name of Lim	mited Liability Company	•	
The enclose	ed Articles of A	Amendment and fee(s) are sub	bmitted for filing.		
Please retur	rn all correspor	ndence concerning this matter	r to the following:		
		Kevin C. Brown			
			Name of Person		
	Division of Corporations Konscious Cigars 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: Kevin C. Brown Name of Person Konscious Cigars LLC Firm/Company 3060 E College Ave #180 Address Ruskin, FL 33570 City/State and Zip Code kbrown@konsciouscigars.com G-mail address: (to be used for fature annual report notification) For further information concerning this matter, please call: Susic Mooney 1240 So5-3958 **Area Code** Daytime Telephone Number Enclosed is a check for the following amount: \$\begin{array}{c} \text{Mailing Address:} \text{Certificate of Status & Certificate of Status & Certificat Opy (additional copy is enclosed)} \text{Certificate of Status & Certificat Opy (additional copy is enclosed)} \text{Division of Corporations} \text{Pio. Box 6327} \text{The loss of Corporations} \text{Pio. Box 6327} \text{The loss of Status Street Address:} \text{Registration Section} \text{Division of Corporations} \text{Pio. Box 6327} \text{The loss of Status Status & Centre of Tallahassee.} \text{Fi 32314} \text{Pio. Moorros Street Status \$10.00 \text{Pions of Corporations} \text{Pio. Moorros Street Status \$10.00 \text{Pions of Tallahassee.} \text{Pio. Street Status \$10.00 \text{Pions of Corporations} Pio. Moorros Street Status \$10.00 \text{Pions of Capper at the Street St				
Fi			Fim/Company		
			Address		
		Ruskin, FL 33570			
			•		
For further	information co		·		
Susie Moor	пеу				
	Name of	Person		_	
Enclosed is	a check for the	e following amount:			
■ \$25.00	Filing Fee		Certified Copy Certificate of (additional copy is enclosed) Certified Copy	Status & y	
			.	, ,	
Re Di P.	egistration Solvision of Co O. Box 6327	ection orporations	Registration Section Division of Corporations The Centre of Tallahassee		
Ta	allahassee, F	L 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Konscious Cigars LLC	
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company florida document number $\frac{L18000014859}{L18000014859}$.	were filed on 1/17/2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
inter new principal offices address, if applicable:	3060 E College Ave Suite 180
Principal office address MUST BE A STREET ADDRESS)	Ruskin, FL 33570
inter new mailing address, if applicable:	3060 E College Ave. #180
Mailing address MAY BE A POST OFFICE BOX)	Ruskin, FL 33570
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new regist
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 605, 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Susie Mooney	3060 E College Ave, #180	≣ Add
		Ruskin. FL 33570	□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
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			□Change
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			□Remove
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ective date, if other than the offective date is listed, the date must	date of filing:	(optional	il) ng) Pursuant to 605 020
e: If the date inserted in this blo ument's effective date on the De	ck does not meet the applicable statut	tory filing requirements, this da	ite will not be listed a
union a checure date on the De	partment of State's records.		
cord specifies a delayed effective	date, but not an effective time, at 12:	01 a.m. on the earlier of: (b)	The 90th day after the
filed.		The second secon	~**
, May 13	2024		• •
ed			:
UK	2		- •
	Signature of a member or authorized repre	esentative of a member	- 1