

To:

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2024-06-20 05:57:18 UTC+14

18506176383

From: ZenBusiness User

6/19/24, 11:54 AM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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((H24000213084 3))



H240002130843ABCV

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Division of Corporations
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From:

Account Name : ZENBUSINESS INC.
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Phone : (844)449-3624
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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PROLUX VAPES LLC

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To:

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2024-06-20 05:57:18 UTC+14

18506176383

From: ZenBusiness User

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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ProLux Vapes 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 01/16/2024 and assigned
Florida document number 124000031111.

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

City

Florida

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 Changing Registered Agent, Signature of New Registered Agent

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Jacob Thomas	4801 Esedra Ct	<input type="checkbox"/> Add
		Apt 104	<input checked="" type="checkbox"/> Remove
		Lake Worth, FL 33467	<input type="checkbox"/> Change
COO	Samuel Szwarc	555 NE 8th St	<input type="checkbox"/> Add
		Apt 1805	<input checked="" type="checkbox"/> Remove
		Fort Lauderdale, FL 33304	<input type="checkbox"/> Change
MGR	Tyler Leonard	1031 SW 100TH TER	<input type="checkbox"/> Add
		PEMBROKE PINES, FL 33025	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Samuel Szwarc	555 NE 8th St	<input checked="" type="checkbox"/> Add
		Apt 1805	<input type="checkbox"/> Remove
		Fort Lauderdale, FL 33304	<input type="checkbox"/> Change
AMBR	Jacob Thomas	4801 Esedra Ct	<input checked="" type="checkbox"/> Add
		Apt 104	<input type="checkbox"/> Remove
		Lake Worth, FL 33467	<input type="checkbox"/> Change
AMBR	Tyler Leonard	1031 SW 100TH TER	<input checked="" type="checkbox"/> Add
		PEMBROKE PINES, FL 33025	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be from a notebook or a standard ruled sheet of paper. There is no handwriting or other markings on the page.

E. Effective date, if other than the date of filing: _____ (optional)
(If not effective date is later than the date of filing, enter the date.)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed

Dated June 19th 2024

As/ Samuel Szwarc

Signature of a member or authorized representative of a member

Samuel Szwarc

Typed or printed name of signee