

N1400000.5875

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

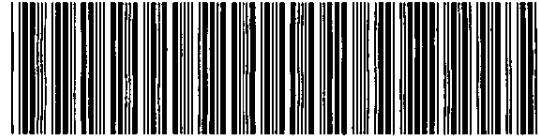
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DIVISION OF CORPORATIONS  
15 JAN 20 PM 3:23  
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TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED  
15 JAN 22 PM 4:01  
CORPORATION  
UNITED STATES DEPARTMENT OF STATE

N/c  
01/23/15  
Dc



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 21, 2015

RONALD G. MEYER/ LYNN THOMAS  
MEYER, BROOKS, DEMMA AND BLOHM, PA  
P. O. BOX 1547  
TALLAHASSEE, FL 32302

SUBJECT: CITIZENS AGAINST TOBACCO, INC.  
Ref. Number: N14000005875

NOT INTENDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

15 JAN 22 PM 1:27

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DIVISION OF CORPORATIONS

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If there are NO MEMBERS ENTITLED TO VOTE on a proposed amendment, the document must contain: (1) a statement that there are no members or members entitled to vote on the amendment and (2) the date of adoption of the amendment by the board of directors.

Please return your document, along with 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) 245-6050.

Darlene Connell  
Regulatory Specialist III

Letter Number: 215A00001193

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: **Citizens Against Tobacco, Inc.**

DOCUMENT NUMBER: **N14000005875**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Ronald G. Meyer/Lynn Thomas**

(Name of Contact Person)

**Meyer, Brooks, Demma and Blohm, PA**

(Firm/ Company)

**P.O. Box 1547**

(Address)

**Tallahassee, Florida 32302**

(City/ State and Zip Code)

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Ronald Meyer/Lynn Thomas** at **(850) 878-5212**

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|--|--|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

AMENDMENT TO ARTICLES OF INCORPORATION  
OF  
CITIZENS AGAINST TOBACCO, INC.

FILED  
15 JAN 22 PM 4:01  
NOTARY PUBLIC  
TALLAHASSEE, FLORIDA

The Board of Directors of the Corporation now known as Citizens Against Tobacco, Inc. (Document Number N14000005875), in accordance with the provisions of Section 617.1002(1)(b), Florida Statutes, hereby amends Article One of the Articles of Incorporation to reflect a name change. Such article shall hereafter read:

ARTICLE I  
Name and Principal Place of Business

The name of the corporation is "Citizens Against Cigarette Manufacturers, Inc." The initial principal place of business is: 11701 Lake Victoria Gardens Avenue, Suite 3201, Palm Beach Gardens, Florida 33410

There are no members entitled to vote.

The above change has been adopted and unanimously approved by the Board of Directors of the Corporation at a special meeting held on January 12, 2015.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal this 12<sup>th</sup> day of January, 2015.



Secretary/Treasurer

STATE OF FLORIDA  
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me on this 12<sup>th</sup> day of January, 2015, by Sean Domnick, the Secretary/Treasurer of the corporation who is personally known to me.



NOTARY PUBLIC  
My Commission Expires:

