## POO DOOGHAIDS

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| PICK-UP WAIT MAIL                        |
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| Special Instructions to Filing Officer:  |
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MALLANTE LL GUEST PARK

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORPO            | RATION:Antonio's Cigar Co                   | ).  |                          |  |  |
|--------------------------|---|---|--------------------------|--|--|
| DOCUMENT NUME            | BER: P00000049105                           |   |                          |  |  |
| The enclosed Articles    | of Amendment and fee are su                 | bmitted for filing.   |                          |  |  |
| Please return all corres | spondence concerning this ma                | tter to the following:  |                          |  |  |
|                          | Anthony P. Prieto                           |   |                          |  |  |
|                          |   | Name of Contact   | Person                   |  |  |
|                          | Registered Agent for Antonic                | o's Cigar , Co.   |                          |  |  |
|                          |   | Firm/ Compa   | any                      | <del></del>  |  |
|                          | 3705 North Himes Avenue                     |   |                          |  |  |
|                          | · <del></del>                               | Address   |                          | <del></del>  |  |
|                          | Tampa, Florida 33607                        |   |                          |  |  |
|                          |   | City/ State and Zi  | ip Code                  |  |  |
| lawa                     | rieto@hotmail.com                           |   |                          |  |  |
|                          | E-mail address: (to be us                   | sed for future annual   | report n                 | notification)  |  |
|                          | .,  |   |                          | ,  |  |
| For further information  | n concerning this matter, pleas             | se call:  |                          |  |  |
| Anthony P. Prieto        |   | 813   |                          | 2409317  |  |
| Name o                   | of Contact Person                           | A   | rea Cod                  | e & Daytime Telephone Number   |  |
| Enclosed is a check fo   | r the following amount made                 | payable to the Florid   | la Depar                 | tment of State:  |  |
| \$35 Filing Fee          | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing For Certified Copy (Additional copy enclosed) |                          | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |
| <u>Mai</u>               | ling Address                                |   | Street A                 |  |  |
|                          | endment Section                             |   | Amendment Section        |  |  |
|                          | sion of Corporations                        |   | Division of Corporations |  |  |
| P.O.                     | Clifton Building                            |   |                          |  |  |
| Tallahassee, FL 32314    |   | 2661 Executive Center Circle                                  |                          |  |  |

Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

| Λ ,  | of  |
|--|---|
| Antonio  | 5 Cigarico En En  |
| (Name of Corporat  | ion as currently filed with the Florida Dept. of State)   |
| Poomo  | 19105   |
| (Document)   | ment Number of Corporation (if known)   |
| Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:                  | la Statutes, this Florida Profit Corporation adopts the following amendment(s) t  |
| A. If amending name, enter the new name of the c   | orporation:   |
|  | The new   |
|  | rd "corporation," "company," or "incorporated" or the abbreviation o," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A." |
| B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD     |   |
|  |   |
|  |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO                  | <u> </u>  |
|  |   |
|  |   |
| D. If amending the registered agent and/or registe   | red office address in Florida, enter the name of the  |
| new registered agent and/or the new registered   |   |
| Name of New Registered Agent   |   |
|  |   |
|  | (Florida street address)  |
| New Registered Office Address:   | , Florida   |
| New Registered Office Address.   | (City) (Zip Code)   |
|  |   |
|  |   |
| New Registered Agent's Signature, if changing Re  I hereby accept the appointment as registered agent. | gistered Agent:  I am familiar with and accept the obligations of the position.   |
|  |   |
|  |   |
|  | CN D in IA is CI  |
| Sigi   | nature of New Registered Agent, if changing   |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Ch. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offi held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change          | <u>PT</u>                | John Doc          |                                |
|----------------------------|--------------------------|-------------------|--------------------------------|
| X Remove                   | $\underline{\mathbf{v}}$ | Mike Jones        |                                |
| X Add                      | <u>sv</u>                | Sally Smith       |                                |
| Type of Action (Check One) | <u>Title</u>             | <u>Name</u>       | <u>Addres</u> s                |
| 1) Change                  | P                        | Anthony P. Prieto | 3705 North Himes Avenue        |
| Add X Remove               |                          |                   | Tampa, Florida 33607           |
| 2) Change                  | D                        | Rena M. Prieto    | 4310 Carrollwood Village Drive |
| Add                        |                          |                   | Tampa, Florida 33618           |
| Remove  3 ) Change         | PD                       | Bryan C. Prieto   | 4507 Amberly Oaks Court        |
| X Add Remove               |                          |                   | Tampa, Florida 33614           |
| 4) Change Add              |                          |                   |                                |
| Remove                     |                          |                   |                                |
| 5) Change Add              |                          |                   |                                |
| Remove                     |                          |                   |                                |
| 6) Change                  |                          |                   | <del></del>                    |
| Remove                     |                          |                   | <del></del>                    |

| Attach additional sheets, if necessary).                                  | les, enter change(s) here: (Be specific) |                          |                                       |
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| f an amendment provides for an exch                                       | ange, reclassification, or ca            | ncellation of issued sha | ares,                                 |
| provisions for implementing the amer<br>(if not applicable, indicate N/A) | dment if not contained in t              | he amendment itself:     |                                       |
| (y not applicable, maicale 1974)  |  |                          |                                       |
|   |  |                          |                                       |
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|   |  |                          |                                       |

|   | May 14, 2019  |
|---|---|
| The date of each amendment(s) a date this document was signed.        |   |
| Effective date if applicable:   |   |
|   | (no more than 90 days after amendment file date)  |
| Note: If the date inserted in this document's effective date on the D | block does not meet the applicable statutory filing requirements, this date will not be listed as epartment of State's records.                               |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )  |
| The amendment(s) was/were ad by the shareholders was/were s           | opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.  |
|   | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):                 |
| "The number of votes cas  | for the amendment(s) was/were sufficient for approval   |
| by  | (voting group)  |
| •   | (voting group)  |
| ☐ The amendment(s) was/were ad action was not required.               | opted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/were ad action was not required.                 | opted by the incorporators without shareholder action and shareholder   |
| May 14, 2<br>Dated  | 019   |
| Signature   | anthony P. Prieto   |
| · ·   | director, president of other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court |
|   | nted fiduciary by that fiduciary)   |
|   | Anthony P. Prieto   |
|   | (Typed or printed name of person signing)   |
|   | President and Registered Agent  |
|   | (Title of person signing)   |