P0800064113

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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: Smokis H.T Exorics		
DOCUMENT NUMBER: POSODO 64113		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Supher Coroaud Name of Contact Person Smokin Hor Exotils Firm/ Company 1100 SE 5th Cour unit 79 Address Poupono Buch FL 33060 City/ State and Zip Code		
Name of Contact Person		
SMOKIN HOT EXOTILS		
Firm/ Company		
Address		
Pamparo Beach FL 33060		
City/ State and Zip Code		
E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Contact Person at (201) 873 · 8700 Area Code & Daytime Telephone Number		
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:		
S35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) S43.75 Filing Fee Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Street Address Amendment Section		

Division of Corporations

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

Tallahassee, FL 32301

Clifton Building 2661 Executive Center Circle

Articles of Amendment

to

Articles of Incorporation of Smakin Hor Crotics INC.

			— *· ——	
(Name of Corporation	n as currently file	ed with the F	lorida Dept. of State)	

P08000064113

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	_
SMOKIN HOT E	EXOTICS INC. The new
name must be distinguishable and contain the word "corporal "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1100 SE 5th COULT WIT 79 Pampano Beach FL 33060
	33060
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1100 SE 5th Cover UNT 79 Fompowo Back FL 33060
·	Pompovo Back FL
	33060
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	255:
1100 SE 5TA	Cover Pompeno Best UNIT 79
New Registered Office Address: Pappano	Street address) Florida 33060 (Zip Code)
	•
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt:
Therein accept the appointment as registered agent. That finding	with and accept the boulgations by the position; 17,
Signature of New Begistere	d to me if all makes
Signature of New Hegistere	a Ageni, ij changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and 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 = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office 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 is 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 Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name N/A	<u>Addres</u> s
1) Change		<i>"</i> / · ·	
Add			
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if nec				
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If an amendment provides fo provisions for implementing				
(if not applicable, indicat		/ <u>.</u>		-
	/	<u>/A</u>		
		<u> </u>		
				
		- 		

The date of each amendment(s) adoption: 4/86/18 date this document was signed.	, if other than the
<u> </u>	
Effective date if applicable: 4/06/13 (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by Stephen Corogus Pres; vent	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 9/06/3	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Stephen CorogNO	
(Typed or printed name of person signing)	
President	
(Title of person signing)	