P10000019781

(Reque	estor's Name)	
(Addre	ess)	
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(City/S	state/Zip/Phone	∌ #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nar	ne)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	

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08/20/10--01022--022 **43.75

TALLIAHASSEE FLORIDA
TALLIAHASSEE FLORIDA
TO SEP 20 PM 3: 28

Amend Cus (10 9/20/10)

Mr. # 1028

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	I Cigais Ir	nc.
DOCUMENT NUMBER: P10000	V/	
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Joseph R. Fig.	ORi	
(Name o	of Contact Person)	
Fs. F. Cigars	, ore	
(Fir	m/ Company)	
2725 N. Fede	eral they	
_	(Address)	
Delray Beach	F/4, 33483	
(City/S	tate and Zip Code)	
Solscigar Lounge (Eghail address: (10 be us	Sed for future annual report notific	ation)
For further information concerning this matter, plea	ase call:	
Joe Flori (Name of Contact Person)	at (561) 313	-1572
(Name of Contact Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check for the following amount made		
\$35 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporation	ons
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Cente	er Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 10 SEP 20 PM 12: 20

SECRETARY OF STATE TALLAHASSEE, FLORIDA

August 23, 2010

JOSEPH R. FIORI F & F CIGARS, INC. 2725 N. FEDERAL HWY DELRAY BEACH, FL 33483

SUBJECT: F & F CIGARS, INC. Ref. Number: P10000019781

We have received your document for F & F CIGARS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 310A00020222

9-15-2010 Enclosed Please find the corrected Amendment Articles ms requested Amis Fiori, UP.

Articles of Amendment

to

FÉF Cigars Inc	Oba Joes Cigar Lounge
(Name of Corporation as currently filed with	the Florida Dept of State)
P10000019781	<i>U</i>
(Document Number of Corporat	ion (if known)
(Document Number of Corporat	ion (it known)
Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
	The new
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associ	poration," "company," or "incorporated" or the Corp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2725 N. Federal Hwy Delray Blach Ha
	33483
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	801 S. Olive aue #112 West Palm Black Ha 33401
·	West foun Islack Ha 33401
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, enter the name of the dress:
Name of New Registered Agent:	
New Registered Office Address: (Flor	ida street address)
	, Florida
(City	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

Sec.	Alicia Robles	Address 801 S. Dlive and 412 WPB 769 33401	Type of Action Add Remove
			_ □ Add □ Remove
			_
(with the	dditional sheets, if necessary). (Be spec		
F. Ifan an	nendment provides for an exchange, re	eclassification, or cancellation of is	sued shares,
	ons for implementing the amendment is or applicable, indicate N/A)	f not contained in the amendment	<u>itself:</u>

The date of each amendment	(s) adoption: 8 - 16 - 2010
Effective date <u>if applicable</u> : •	(date of adoption is required) SCINE QS & BOVE (no more than 90 days after amendment file date)
<u> </u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	cast for the amendment(s) was/were sufficient for approval
by	(voting group) ."
01121/	(voting group) re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	9-15-2010 Joseph R. Fron
(By sele	director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	TOSCH R. FIORI (Typed or printed name of person signing)
	President (Title of person signing)