Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100002636273)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: BANOS, GARCIA, AND ASSOCIATES, P.A. Account Name

Account Number: 120100000067

Phone

(305)856-6626

Fax Number

: (305)856-6628

de the the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

COR AMND/RESTATE/CORRECT OR O/D RESIGN HAVANA DREAMS CIGARS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment

•		(4,1,2			
gg.	2	•	Articles of Ame to	ndment	State) Branch Br
		A	articles of Incorp	poration	THE TO THE
		HAVANA	DREAMS CIO	SARS INC	_ 35/2 P
	(Name o			h the Florida Dept. of	State)
-			21000003164 Number of Corpor		
ırsua İlow	ant to the provisiing amendment(s	ions of section 607. to its Articles of Ir	.1006, Florida Sta neorporation:	tutes, this Florida Pro	ofit Corporation adopts the
. II	amending name.	enter the new nam	ie of the corporat	ion:	
ncor Co". socia <u>En</u>	porated" or the A profession ation," or the ab ter new princips	abbreviation "Corp	p.," "Inc.," or C name must conta applicable:	he word "corporation on," or the designation in the word "charte	n "Corp." "Inc." or
		address, if applica		10859 EMERALD C	ST PRK W
	,			SUITE 202	
				DESTIN, FL 32550	
If a	emending the re-	elstered agent and/ nt and/or the new r	or registered office a	<u>se address in Florida. ddress:</u>	enter the name of the
	Name of New R	egistered Agent:	VINCENT AU	THEMENT	
	Man Danie 1	000-11		ALD CST PRK W, STE	202
	New Registered	Office Address:	•	rida street address)	
			DESTIN	(City)	, Florida_ <u>32550_</u> (Zip Code)
D		la Cianatura 16 aba			
	by accept the ap	's Signature. If cha pointment as registe			cept the obligations of the
		-	Signature of Ne	W Registered Agent, if	thanging
					······································

Page 1 of 3

1.6.8 H100002636273)))

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)

Title	<u>Name</u>	<u>Addresa</u>	Type of Action
PST	CARRENO, IVETTE	2621 SW 132ND AVE MIAMILEL 33175	Add Remove
<u>PST</u>	VINCENT AUTHEMENT	10859 EMERALD CST PRK SUITE 202 DESTIN, FL 32550	Add Remove
			Add Remove
provisi	mendment provides for an exchange one for implementing the amendment of applicable, indicate N/A)	, reclassification, or cancellation of the amendment of the amendment in the amendment of t	f issued shares, ent itself:
			

Dec. 10. 2010 12:44PM I C S (H100002636273)))

No. 0662

The date of each amendmen	t(s) adoption: <u>11/30/2010</u>
Effective date if applicable:	11/30/2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	ere approved by the shareholders through voting groups. The following statement ed 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	
	(voling group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_11/30	0/2010
sel-	v a director, president or other officer – if directors or officers have not been ected, by an incorporator of in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) (Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)