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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corpor	rations			
			OKAH LOUNGE	
DOCUMENT NUMBI	_{ER:} <u>P1000004903</u>	6		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
•	WALLED MAHER	R OKAB		
. -		Name of Contact Person	1	
<u>;</u>	S & 2H INC dba l		H LOUNGE	
	20041 S. TAMIAN	Firm/ Company	#7	
	2004 I S. I AIVIIAI	 	#1	
		Address		
<u> </u>	ESTERO, FLORI		· · · · · · · · · · · · · · · · · · ·	
		City/ State and Zip Cod	e	
MB	ENTON@JOHNE	AVISCPA.COM		
,	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:		
WALLED MA	HER OKAB	_{at (} 239	, 691-9299	
Name of	f Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Centificate of Status Certified Copy (Additional Copy is enclosed)	
	ing Address		Address	
	ion of Corporations	Amendment Section Division of Corporations		
	ion of Corporations Box 6327		Building	
	hassee, FL 32314	2661 E	executive Center Circle	
		Tallaha	issee, FL 32301	

Articles of Amendment Articles of Incorporation

S & 2H INC dba LAYLA HOOKAH LOUNGE

(Maine of Corporation as	currently filed with the Florida De	pt. of State)	
P10000049036			
(Documer	nt Number of Corporation (if known)	······································	<u> </u>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Pi</i>	rofit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co". A p		
B. Enter new principal office address, (Principal office address MUST BE A S			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> of	icable: OFFICE BOX		
D. If amending the registered agent an new registered agent and/or the new	w registered office address:	_	
Name of New Registered Agent	WALLED MAHER OK	AB	
	% 20041 S. TAMIAMI T	RAIL UNIT 7	
	(Florida street address	r	
New Registered Office Address:	ESTERO	, Florida 33928	ļ

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)

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 <math>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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	AMER M MANSOUR	20041 S TAMIAMI TRAIL, UNIT #7 ESTERO, FLORIDA 33928
2) Change Add Remove	<u>P</u>	WALLED MAHER OKAB	8209 SILVER BIRCH WAY LEHIGH ACRES, FLORIDA 33971
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)

an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption:JUNE _ 11 ,20	012
Effective date if applicable: JUNE 11, 2012	
	days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)	•
■ The amendment(s) was/were adopted by the shareholders. The n by the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to voting group entitled group ent	
"The number of votes cast for the amendment(s) was/were	sufficient for approval
by	33
☐ The amendment(s) was/were adopted by the board of directors was not required.	ithout shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators withou action was not required.	at shareholder action and shareholder
Dated $O/II/OO$	12
Signature (By a director, president or other officer selected, by an incorporator – if in the happointed fiduciary by that fiduciary)	r – if directors or officers have not been nands of a receiver, trustec, or other court
AMER M. MANSO	UR
· (Typed or printed na	me of person signing)
PRESIDENT	
(Title of person si	gning)