P11000051222

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COVER LETTER

		COVER LETTER		
TO: Amendment Sect Division of Corp			7	· 清明 · · · · · · · · · · · · · · · · · ·
NAME OF CORPOR	RATION: MDM CIGARS IN	NC		
DOCUMENT NUM	BER: P11000051222			
	of Amendment and fee are so			
Please return all corre	spondence concerning this ma	atter to the following:		
	MARIO D MAGAN	•		
		Name of Contact Perso	n	
	MDM CIGARS INC			
		Firm/ Company		
	1817 7TH AVE			
		Address		
	TAMPA, FL 33605			
MAG	ANMARIO@GMAIL.COM	City/ State and Zip Cod		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
MARIO D MAGAN		at (760-4060	
Name o	of Contact Person	\	de & Daytime Telephone Number	
Enclosed is a check to	r the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 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)	
Ame Divi P.O.	ling Address Indment Section Ission of Corporations Box 6327 Inhassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

In Dept. of State) ation adopts the following amendment(s) of the new incorporated or the abbreviation corporation name must contain the
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, Florida(Zip Code)
the name of the

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: \underline{X} Change	PT Jo	ohn Doe	
X Remove	<u>y</u> <u>w</u>	1ike Jones	
$X \wedge dd$	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DIRECT	MARIO O MAGAN	3308 W PARIS ST
X Add			TAMPA, FL 33614
Remove			
2) Change	 		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)	
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		,
f an amendment provides for an each	hange reclassification or cancellation of issued shares	
f an amendment provides for an excl provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
f an amendment provides for an excl provisions for implementing the ame (if not upplicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	•	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were accion was not required.	dopted by the incorporators without shareholder action and shareholder	
08/26/201	16	
DatedSignature	ille gran	
(By a select	director/president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	MARIO D MAGAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	