P12000012962

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DIVISION OF CORPORATIONS

Amanda

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SM	OKER'S FA	NTASY INC		
DOCUMENT NUMBER: P1200	0012962			
The enclosed Articles of Amendment a		d for filing.		
Please return all correspondence concer	rning this matter to	the following:		
ABUL FA	IZ ABUL AL			
	Na	me of Contact Person		
SMOKER	'S FANTAS	SY INC		
		Firm/ Company		
1761 RE	CEDAR D	R # 16		
		Address		
FORT MY	ERS, FL. 3	3907		
		y/ State and Zip Code		
GASSTATIO	NGURU@\	AHOO.COM	1	
		future annual report		
For further information concerning this	matter, please call			
ABUL FAIZ ABUL ALA	M	at (239	, 628-2178	
Name of Contact Person	1		le & Daytime Telephone Number	
Enclosed is a check for the following an	mount made payab	e to the Florida Depa	rtment of State:	
\$35 Filing Fee \$43.75 File Certificate	e of Status C	43.75 Filing Fee & ertified Copy additional copy is nclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
Amendment Section	lama	Amendment Section		
Division of Corporati P.O. Box 6327	IONS		n of Corporations Building	
Tallahassee, FL 3231	4	2661 Executive Center Circle		
_		Tallaha	ssee, FL 32301	

Articles of Amendment to Articles of Incorporation of

SM	OK	FR'S	SFA	NT	4SY	INC
UIVI	ンハ	$-1 \cdot \cdot$, , ,	\! \ ! /	101	\cdots

SINORLIVOTALITAGE ING		_
(Name of Corporation as currently filed with the F	lorida Dept. of State)	
P12000012962		
(Document Number of Corporation (i	f known)	_
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corporation:		
		_The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc" or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation "	'Co". A professional corporation name must	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	SECRETARY DIVISION OF CO
D. If amending the registered agent and/or registered office adding new registered agent and/or the new registered office address	<u>:</u>	EPORATIONS RPORATIONS AM 9: 29
Name of New Registered Agent ABUL ALAM AB		
1761 RED CED		
New Registered Office Address: FORT MYERS	rees address) , Florida_33907	_
(City)		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v Signature of New Registered A	with and accept the obligations of the position.	

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: XChange	<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
Change Add X Remove	PD	MD M HAQUE	13936 VILLAGE CREEK DRIVE FT MYERS, FL. 33908
2) Change	PD	BALANANDAN AJESH	1911 ANDAWSIA BLVD CAPE CORAL, FL. 33909
3) Change Add Remove		_	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

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N	/A				
7					
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			<u></u>		
 					
an amendment p	rovides for an excha	inge, reclassific	ation, or cancella	ation of issued sl	nares,
orovisions for imp	olementing the amen ble, indicate N/A)	dment it not co	ntained in the ar	nenament itself:	
(i) not approve	,				
N/A					
N/A					

. The date of each amendment	t(s) adoption: MAY 1ST 2012
Effective date if applicable:	MAY 1ST 2012
Enecuve date <u>in applicable</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) ere sufficient for approval.
	re 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	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_MA	Y 1ST 2012
Se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court propinted fiduciary by that fiduciary)
	ABUL ALAM ABUL FAIZ (Typed or printed name of person signing)
	VICE PRESIDENT AND DIRECTOR

Page 4 of 4

(Title of person signing)