P1300052234

(Requestor's Name)			
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(Addiess)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
,,			
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18 OCT 29 MH 8: 0:
SECRETARY OF STATE
TALL MIASSEE IN ORDER

COVER LETTER

TO: Amendment Section Division of Corpo		
NAME OF CORPOR	RATION: C(GAM	2 Refublic USA, Inc.
DOCUMENT NUME	BER: <u>1130000</u>	052234
	of Amendment and fee are so	/
Please return all corres	pondence concerning this ma	atter to the following:
	LAuren	Name of Contact Person
	1.0	Name of Contact Person
	LAW Offices	Firm/Company
	3326 NE	OF LAURENCE B. Blacke, P.A. Firm/Company 33 STREET
		Address
	FORT LAUVE	2000-le FL. 33308
		City/ State and Zip Code
	LBOLBL	
-	E-mail address: (to be u	ised for future annual report notification)
For further information	a concerning this matter, plea	ise call:
LACUZ-ence	BLACKE PS	55, at (954) 566 - 5070 Area Code & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Department of State:
\$35 Filling Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section
Division of Corporations		Division of Corporations
	Box 6327 ahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
		\

Articles of Amendment

to

Articles of Incorporation of

CIGAR REPUBL	1C USA, INC. rently filed with the Florida Dept. of State) 234
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P13000522	134
(Document Numl	ber of Corporation (if known)
·	•
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad-	
Name of New Registered Agent	
	E G 8
(Flori	da street address)
New Registered Office Address:	(City) Florida (Zip Code) [7]
	TORIUA 8: 0
New Registered Agent's Signature, if changing Registered A	Agent:
I hereby accept the appointment as registered agent. I am fam.	iliar with and accept the obligations of the position
Signature of N	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 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: <u>X</u> Change	PT John	<u>Doe</u>			
X Remove	V Mike Jones				
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith			
Type of Action (Check One)	Title	<u>Name</u>	Address		
1) X Change	7	NICOLO MARIANI	3349 EAST ONKLOWP PARK BLU		
Add			FURT LALDERDALE, FL. 33308		
Kemove					
2) Change	PTD	ANNETTE MARGINI	3349 FAST ONKLAND MAK BLLD		
Add			FURT LAWERUALE, R. 33308		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
0 0					
6) Change					
Add					
Remove			-		

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
-	
f an amandmant muchidae for an arab	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<u> </u>	
	

The date of each amendment(s) adoption:date this document was signed.	October	1,2018	, if other than the
Effective date <u>if applicable</u> :			
Effective date in applicable.	tno more than 90 c	days after amendment file date)	
		·	
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicat f State's records.	ole statutory filing requirements, thi	s date will not be listed as the
Adoption of Amendment(s) (CI	IECK ONE)		
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The n approval,	umber of votes cast for the amendme	ent(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	ie shareholders throug g <i>group entitled to voi</i>	gh voting groups. The following star to separately on the amendment(s):	tement
"The number of votes cast for the ame	ndment(s) was/were s	sufficient for approval	
by			
(vo	ting group)		
The amendment(s) was/were adopted by the action was not required.	board of directors wi	ithout shareholder action and shareh	older
☐ The amendment(s) was/were adopted by the action was not required.	incorporators withou	it shareholder action and shareholder	r
Dated 10/23)18			
Signature &			
(By a director, pres	orporator – if in the h	- if directors or officers have not be ands of a receiver, trustee, or other c	court
	ANNETTE A	MARIANI	
	Typed or printed nan	ne of person signing)	
	-Preside,	v I	
	(Title of p	person signing)	

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