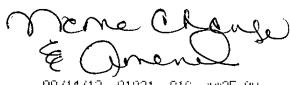
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CODDOR	ATION: VAPOR ON	NE INC			
NAME OF CORPORATION: VAPOR ONE INC DOCUMENT NUMBER: P13000063338					
	of Amendment and fee are su				
Please return all corres	pondence concerning this ma	tter to the following:			
RENE I ARREDONDO					
	VAPOR ONE INC	Name of Contact Person	n .		
Firm/ Company 4288 SOUTH UNIVERSITY DR					
DAVIE FL 33328					
\/A\	PORONE01@GM	City/ State and Zip Code	e		
<u> </u>		sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
RENE I ARREDONDO		_{at (} 754	2347551 de & Daytime Telephone Number		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r 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 Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	ling Address Induction Section Sion of Corporations Box 6327 That assee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to

FILED

Articles of Incorporation of

2013 AUG 14 PM 12: 35

SECRETARY OF STATE VAPOR ONE INC (Name of Corporation as currently filed with the Florida Dept. of StaffALL AHASSEE, FLORIDA P13000063338 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: VAPOR 1 INC The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (Zip Code) 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 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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			4288 SOUTH UNIVERSITY DR
Add			
Remove			
2) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
****	,

an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	onge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
provisions for implementing the amen	inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
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rovisions for implementing the amen	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:

The date of each amendment(s) adopted this document was signed.	ption:	, if other than the		
Effective date if applicable:				
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
■ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.			
	ved by the shareholders through voting groups. The following statement ich voting group entitled to vote separately on the amendment(s):			
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval			
by	(voting group)			
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder			
action was not required.	ed by the incorporators without shareholder action and shareholder			
7/6/20	13			
Signaturo				
(By a dire selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court if iduciary by that fiduciary)	_		
F	RENE I ARREDONDO			
	(Typed or printed name of person signing)			
(OWNER (Title of person signing)			
	(Title of person cigning)			